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L2 ANSWER 1 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2005:423734 CAPLUS

TITLE: **Stable lansoprazole** formulation

INVENTOR(S): Avramoff, Avi; Azoulay, Valerie

PATENT ASSIGNEE(S): Dexcel, Ltd., Israel; Graeser, D'vorah

SOURCE: PCT Int. Appl., 31 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2005044240	A2	20050519	WO 2004-US32775	20041101
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NA, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW			
RW:	BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IS, IT, LU, MC, NL, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG			

PRIORITY APPLN. INFO.: US 2003-515672P P 20031031

AB A **stable** composition comprising a substrate comprising lansoprazole (preferably in the base form), without any alkaline agent; a subcoating layer containing alkaline agent; and an enteric coating layer. The substrate is preferably as inert core with an active layer (containing lansoprazole) layered over it.

TI **Stable lansoprazole** formulation

AB A **stable** composition comprising a substrate comprising lansoprazole (preferably in the base form), without any alkaline agent; a

subcoating layer containing alkaline agent; and an enteric coating layer.
The substrate is preferably as inert core with an active layer (containing lansoprazole) layered over it.

L2 ANSWER 2 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2005:281759 CAPLUS

DOCUMENT NUMBER: 142:341903

TITLE: Pharmaceutical compositions of benzimidazole and processes for their preparation

INVENTOR(S): Singh, Romi Barat; Kumar, Pananchukunnath Manoj; Nagaprasad, Vishnubhotla; Sethi, Sanjeev Kumar; Malik, Rajiv

PATENT ASSIGNEE(S): Ranbaxy Laboratories Limited, India

SOURCE: PCT Int. Appl., 21 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 2

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2005027876	A1	20050331	WO 2004-IB2784	20040827
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NA, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW			
RW:	BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG			
WO 2004075881	A1	20040910	WO 2004-IB536	20040301
W:	AE, AE, AG, AL, AL, AM, AM, AM, AT, AT, AU, AZ, AZ, BA, BB, BG, BG, BR, BR, BW, BY, BY, BZ, BZ, CA, CH, CN, CN, CO, CO, CR, CR, CU, CU, CZ, CZ, DE, DE, DK, DK, DM, DZ, EC, EC, EE, EE, EG, ES, ES, FI, FI, GB, GD, GE, GE, GH, GM, HR, HR, HU, HU, ID, IL, IN, IS, JP, JP, KE, KE, KG, KG, KP, KP, KP, KR, KR, KZ, KZ, KZ, LC, LK, LR, LS, LS, LT, LU, LV, MA, MD, MD, MG, MK, MN, MW, MX, MX, MZ, MZ, NA, NI			
RW:	BW, GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG			

PRIORITY APPLN. INFO.: IN 2003-DE1047 A 20030828

WO 2004-IB536 A 20040301

IN 2003-DE203 A 20030228

AB The tech. field of the present invention relates to **stable** pharmaceutical compns. of acid-labile benzimidazole derivative using increased amts. of low-viscosity hydroxypropylcellulose, and processes for the preparation of these compns. The pharmaceutical composition includes one or more cores. The cores include an acid-labile benzimidazole derivative and at least 10% weight/weight of low-viscosity hydroxypropylcellulose by weight of the benzimidazole derivative

REFERENCE COUNT: 5 THERE ARE 5 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

AB The tech. field of the present invention relates to **stable** pharmaceutical compns. of acid-labile benzimidazole derivative using increased

amts. of low-viscosity hydroxypropylcellulose, and processes for the preparation of these compns. The pharmaceutical composition includes one or more

cores. The cores include an acid-labile benzimidazole derivative and at least 10% weight/weight of low-viscosity hydroxypropylcellulose by weight of the benzimidazole derivative

IT 51-17-2D, Benzimidazole, derivs. 73590-58-6, Omeprazole 102625-70-7, Pantoprazole 103577-45-3, **Lansoprazole** 104340-86-5, Leminoprazole 117976-89-3, Rabeprazole 117976-90-6, Pariprazole 119141-88-7, Esomeprazole 138786-67-1, Pantoprazole sodium
 RL: PEP (Physical, engineering or chemical process); PYP (Physical process); THU (Therapeutic use); BIOL (Biological study); PROC (Process); USES (Uses)

(pharmaceutical compns. of benzimidazole)

L2 ANSWER 3 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2005:99343 CAPLUS

DOCUMENT NUMBER: 142:162692

TITLE: Pharmaceutical compositions having a swellable coating

INVENTOR(S): Srinivas, Irukulla; Dixit, Akhilesh Ashok; Reddy, Pallemalli Venkata Siva; Reddy, Billa Praveen; Mohan, Mailatur Sivaraman; Ravinder, Kodipyaka; Nasare, Vijay; Pergament, Edward D.

PATENT ASSIGNEE(S): Reddy's Laboratories, Inc., USA; Reddy's Laboratories Ltd

SOURCE: PCT Int. Appl., 32 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2005009410	A2	20050203	WO 2004-US22910	20040716
W:				
AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NA, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW				
RW:				
BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG				

US 2005042277 A1 20050224 US 2004-893563 20040716

PRIORITY APPLN. INFO.: IN 2003-CH580 A 20030717

IN 2003-CH1064 A 20031230

US 2004-563707P P 20040420

AB A pharmaceutical dosage form containing an active agent that is not **stable** in the presence of an acid comprises a core containing the active and a disintegrant, a swellable coating surrounding the core, and an enteric coating surrounding the swellable coating. Thus, core pellets contained omeprazole 40, mannitol 236, Crospovidone 18, HPMC 8, Ploxamer-407 5, and meglumine 3, mg/capsule. A swellable coating composition comprised Zein F6000 2 mg. The enteric coating contained HPMC phthalate 63.24, tri-Et citrate 6.31 and talc 9.45 mg/capsule.

AB A pharmaceutical dosage form containing an active agent that is not **stable** in the presence of an acid comprises a core containing the active and a disintegrant, a swellable coating surrounding the core, and an enteric coating surrounding the swellable coating. Thus, core pellets

contained omeprazole 40, mannitol 236, Crospovidone 18, HPMC 8, Ploxamer-407 5, and meglumine 3, mg/capsule. A swellable coating composition comprised Zein F6000 2 mg. The enteric coating contained HPMC phthalate 63.24, tri-Et citrate 6.31 and talc 9.45 mg/capsule.

IT 50-00-0D, Formaldehyde, casein conjugates, biological studies 51-17-2D, Benzimidazole, derivs. 88-12-0D, polymers 471-34-1, Calcium carbonate, biological studies 497-19-8, Sodium carbonate, biological studies 9000-69-5, Pectin 9002-18-0, Agar 9003-39-8, Polyvinylpyrrolidone 9004-34-6D, Cellulose, derivs. 9004-64-2, Hydroxypropyl cellulose 9004-65-3, Hydroxypropyl methyl cellulose 9005-25-8, Starch, biological studies 9005-32-7, Alginic acid 10103-46-5, Calcium phosphate 25212-88-8, Ethyl acrylate-methacrylic acid copolymer 53237-50-6 73590-58-6, Omeprazole 102625-70-7, Pantoprazole 103577-45-3, **Lansoprazole** 117976-89-3, Rabeprazole 117976-90-6, Rabeprazole sodium 119141-88-7, Esomeprazole 138786-67-1, Pantoprazole sodium 164579-32-2, Pantoprazole sodium sesquihydrate 217087-09-7, Esomeprazole magnesium trihydrate 226904-39-8
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(pharmaceutical compns. having swellable coating)

L2 ANSWER 4 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2004:1005301 CAPLUS

DOCUMENT NUMBER: 142:246134

TITLE: Method of making oral preparation of omeprazole

INVENTOR(S): Hong, Seok Cheon; Kil, Yeong Sik

PATENT ASSIGNEE(S): Korea United Pharm. Inc., S. Korea

SOURCE: Repub. Korean Kongkae Taeho Kongbo, No pp. given
CODEN: KRXXA7

DOCUMENT TYPE: Patent

LANGUAGE: Korean

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
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KR 2003039707	A	20030522	KR 2001-70733	20011114
PRIORITY APPLN. INFO.:			KR 2001-70733	20011114

AB An oral preparation containing omeprazole is provided which is pharmaceutically **stable** by prevention of the loss of activity of omeprazole caused by gastric acid when orally administered and facilitating the absorption thereof into the small intestine, thereby maximizing therapeutic effect. In a method of making an oral preparation, non-volatile minute granules with a particle size of 0.2-0.7 mm are first made using starch and sugar, or only sugar. Then, omeprazole or **lansoprazole** and the salt thereof, and a binder selected from hydroxy Pr Me cellulose or hydroxy Pr cellulose and derivs. thereof are dissolved or diffused in a solvent containing a mixture of purified water, acetone and ethanol. The resulting solution, and the minute granules are mixed together with talc. The mixture is coated by a protection film to produce a pellet having a diameter of 0.3-2.5 mm.

AB An oral preparation containing omeprazole is provided which is pharmaceutically **stable** by prevention of the loss of activity of omeprazole caused by gastric acid when orally administered and facilitating the absorption thereof into the small intestine, thereby maximizing therapeutic effect. In a method of making an oral preparation, non-volatile minute granules with a particle size of 0.2-0.7 mm are first made using starch and sugar, or only sugar. Then, omeprazole or **lansoprazole** and the salt thereof, and a binder selected from hydroxy Pr Me cellulose or hydroxy Pr cellulose and derivs. thereof are dissolved or diffused in a solvent containing a mixture of purified water, acetone and ethanol. The resulting solution, and the minute granules are mixed together with talc. The mixture is coated by a protection film to produce a pellet having a diameter of 0.3-2.5 mm.

IT 9004-64-2, Hydroxy propyl cellulose 9004-65-3, Hydroxy propyl methyl

cellulose 14807-96-6, Talc, biological studies 73590-58-6, Omeprazole
 103577-45-3, **Lansoprazole**
 RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (making oral preparation of omeprazole)

L2 ANSWER 5 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2004:995952 CAPLUS

DOCUMENT NUMBER: 141:416020

TITLE: An improved and **stable** pharmaceutical
 composition containing substituted benzimidazoles
 INVENTOR(S): Venkaiah, Chowdary Nannapaneni; Khadgapathi, Podili;
 Ramarao, Pendyala

PATENT ASSIGNEE(S): Natco Pharma Limited, India

SOURCE: PCT Int. Appl., 50 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2004098573	A1	20041118	WO 2003-IN179	20030508
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NI, NO, NZ, OM, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW			
RW:	GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG			
PRIORITY APPLN. INFO.:			WO 2003-IN179	20030508

AB The present invention relates to improved pharmaceutical preps. containing substituted benzimidazoles, (i.e. omeprazole, **lansoprazole**, pantoprazole, and rabeprazole). The preps. comprise an inert core, constituted by starch and sugar, surrounded by active coating containing at least one substituted benzimidazole in the micronized form, which is mixed with pharmaceutically acceptable non-alkaline and inert excipients, followed by intermediate coating and an enteric coating, in order to guarantee the integrity of the product until it reaches the proximal part of the small intestine, where the formulation will be disaggregated to facilitate the absorption of the substituted benzimidazole compound

REFERENCE COUNT: 3 THERE ARE 3 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

TI An improved and **stable** pharmaceutical composition containing substituted benzimidazoles

AB The present invention relates to improved pharmaceutical preps. containing substituted benzimidazoles, (i.e. omeprazole, **lansoprazole**, pantoprazole, and rabeprazole). The preps. comprise an inert core, constituted by starch and sugar, surrounded by active coating containing at least one substituted benzimidazole in the micronized form, which is mixed with pharmaceutically acceptable non-alkaline and inert excipients, followed by intermediate coating and an enteric coating, in order to guarantee the integrity of the product until it reaches the proximal part of the small intestine, where the formulation will be disaggregated to facilitate the absorption of the substituted benzimidazole compound

ST benzimidazole pharmaceutical **stable**

IT Drug delivery systems
 (capsules; improved and **stable** pharmaceutical composition containing substituted benzimidazoles)

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IT Drug delivery systems
(granules, enteric-coated; improved and **stable** pharmaceutical composition containing substituted benzimidazoles)

IT Castor oil
RL: MOA (Modifier or additive use); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(hydrogenated; improved and **stable** pharmaceutical composition containing substituted benzimidazoles)

IT Antiulcer agents
Plasticizers
Ulcer
(improved and **stable** pharmaceutical composition containing substituted benzimidazoles)

IT Polyoxyalkylenes, biological studies
RL: MOA (Modifier or additive use); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(improved and **stable** pharmaceutical composition containing substituted benzimidazoles)

IT 57-11-4, Stearic acid, biological studies 57-50-1, Sucrose, biological studies 63-42-3, Lactose 69-65-8, D-Mannitol 84-66-2, Diethyl phthalate 84-74-2, Dibutyl phthalate 112-92-5, Stearyl alcohol 117-81-7, Dioctyl phthalate 131-16-8, Dipropyl phthalate 151-21-3, Sodium lauryl sulfate, biological studies 577-11-7, Dioctyl sodium sulfosuccinate 7757-93-9, Dicalcium phosphate 9000-11-7, CM cellulose 9003-39-8, Pvp 9004-32-4 9004-34-6, Cellulose, biological studies 9004-38-0, Cellulose acetate phthalate 9004-62-0, Hydroxyethyl cellulose 9004-64-2, Hydroxypropyl cellulose 9004-65-3, Hpmc 9005-25-8, Starch, biological studies 9005-32-7, Alginic acid 9050-31-1, Hydroxypropyl methyl cellulose phthalate 13463-67-7, Titania, biological studies 14807-96-6, Talc, biological studies 25212-88-8, Eudragit L-100-55 25322-68-3, Peg 36653-82-4, Cetyl alcohol
RL: MOA (Modifier or additive use); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(improved and **stable** pharmaceutical composition containing substituted benzimidazoles)

IT 73590-58-6, Omeprazole 102625-70-7, Pantoprazole 103577-45-3, **Lansoprazole** 117976-89-3, Rabeprazole
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(improved and **stable** pharmaceutical composition containing substituted benzimidazoles)

L2 ANSWER 6 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2004:965061 CAPLUS
DOCUMENT NUMBER: 141:400968
TITLE: Pellet formulations of acid-labile antiulcer benzimidazole compounds
INVENTOR(S): Carvajal Martin, Luis; Asensio Asensio, Juan Carlos; Sevilla Tirado, Francisco Javier
PATENT ASSIGNEE(S): Laboratorios Belmac, S.A., Spain
SOURCE: PCT Int. Appl., 15 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2004096218	A2	20041111	WO 2004-EP50618	20040427
WO 2004096218	A3	20050506		

W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD,

GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, NA, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW
 RW: BW, GH, GM, KE, LS, MW, MZ, NA, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG

PRIORITY APPLN. INFO.:

ES 2003-976

A 20030429

OTHER SOURCE(S):

MARPAT 141:400968

AB The formulations comprise inert granules of sugar/starch which are: initially coated with a non-alkaline active layer having the benzimidazole compound (omeprazole, **lansoprazole**, pantoprazole, rabeprazole, etc.), sodium and/potassium salts of acids of formula R-O-SO₃H wherein R is an alkyl radical of a (C6-C20)-fatty acid (preferably sodium lauryl sulfate), (C6-C20)-fatty acids (preferably oleic acid), sodium and/or potassium salts of (C6-C20)-fatty acids (preferably potassium oleate), sodium carboxymethyl starch and polyvinylpyrrolidone; secondly coated with a non-alkaline barrier layer having hydroxypropylmethylcellulose; and finally coated with an enteric layer. The preferred molar ratio (sodium lauryl sulfate):(oleic acid + potassium oleate) is between 4:1 and 6:1. All coatings are done with aqueous solns., suspensions or dispersions at a relatively high temperature, and all dryings are done at a relatively low temperature and for a relatively short time. They are **stable** over time and useful for oral administration.

AB The formulations comprise inert granules of sugar/starch which are: initially coated with a non-alkaline active layer having the benzimidazole compound (omeprazole, **lansoprazole**, pantoprazole, rabeprazole, etc.), sodium and/potassium salts of acids of formula R-O-SO₃H wherein R is an alkyl radical of a (C6-C20)-fatty acid (preferably sodium lauryl sulfate), (C6-C20)-fatty acids (preferably oleic acid), sodium and/or potassium salts of (C6-C20)-fatty acids (preferably potassium oleate), sodium carboxymethyl starch and polyvinylpyrrolidone; secondly coated with a non-alkaline barrier layer having hydroxypropylmethylcellulose; and finally coated with an enteric layer. The preferred molar ratio (sodium lauryl sulfate):(oleic acid + potassium oleate) is between 4:1 and 6:1. All coatings are done with aqueous solns., suspensions or dispersions at a relatively high temperature, and all dryings are done at a relatively low temperature and for a relatively short time. They are **stable** over time and useful for oral administration.

IT 73590-58-6P, Omeprazole 103577-45-3P, **Lansoprazole**
 RL: IMF (Industrial manufacture); PAC (Pharmacological activity); PEP (Physical, engineering or chemical process); PYP (Physical process); THU (Therapeutic use); BIOL (Biological study); PREP (Preparation); PROC (Process); USES (Uses)
 (pellet formulations of acid-labile antiulcer benzimidazole compds.)

L2 ANSWER 7 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2004:942454 CAPLUS

DOCUMENT NUMBER: 142:155949

TITLE: Modification and purification method of crystalline form of **lansoprazole**

INVENTOR(S): Ahn, Hyeon Suk; Baek, Yong Gu; Jang, Dong Jo; Kim, Gyeong Su; Kim, Min Su; Kim, Sang Hun; Kim, Wan Ju; Lee, Dong U.; Park, Seong Jun; Yoo, Jeong Bok

PATENT ASSIGNEE(S): C-Tri, S. Korea

SOURCE: Repub. Korean Kongkae Taeho Kongbo, No pp. given

CODEN: KRXXA7

DOCUMENT TYPE: Patent

10/773,535

LANGUAGE: Korean
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
KR 2003000779	A	20030106	KR 2001-36898	20010627
PRIORITY APPLN. INFO.:			KR 2001-36898	20010627

AB Provided is a modification and purification method of **Lansoprazole** (crystal form II) into **Lansoprazole** (crystal form I) which is thermodynamically **stable** and is used as a drug.
Lansoprazole, represented by the formula(I), is an inhibitor of proton pump (anti-ulcer agent), has strong antibacterial activity and excellent pharmacol. activity, and is thus useful as a therapeutic agent for stomach ulcer. The method comprises the steps of: mixing 1 weight% of **Lansoprazole** (crystal form II) and 1-100 weight% of an organic solvent; filtering the mixture; and drying the filtrate. The solvent is selected from the groups of ester containing Me acetate and Et acetate; halogenated hydrocarbon such as methylene chloride and chloroform; ethers including THF, Et ether, iso-Pr ether and petroleum ether; hydrocarbons with more than 5 carbons such as pentane, hexane, heptane cyclohexane; nitriles such as acetonitrile; ketones such as acetone; and a mixture thereof.

TI Modification and purification method of crystalline form of **lansoprazole**

AB Provided is a modification and purification method of **Lansoprazole** (crystal form II) into **Lansoprazole** (crystal form I) which is thermodynamically **stable** and is used as a drug.
Lansoprazole, represented by the formula(I), is an inhibitor of proton pump (anti-ulcer agent), has strong antibacterial activity and excellent pharmacol. activity, and is thus useful as a therapeutic agent for stomach ulcer. The method comprises the steps of: mixing 1 weight% of **Lansoprazole** (crystal form II) and 1-100 weight% of an organic solvent; filtering the mixture; and drying the filtrate. The solvent is selected from the groups of ester containing Me acetate and Et acetate; halogenated hydrocarbon such as methylene chloride and chloroform; ethers including THF, Et ether, iso-Pr ether and petroleum ether; hydrocarbons with more than 5 carbons such as pentane, hexane, heptane cyclohexane; nitriles such as acetonitrile; ketones such as acetone; and a mixture thereof.

ST **lansoprazole** cryst form prepn antiulcer agent antibacterial agent

IT Antibacterial agents
Antiulcer agents
(of crystalline form of **lansoprazole**)

IT 103577-45-3P, **Lansoprazole**
RL: PUR (Purification or recovery); PREP (Preparation)
(preparation of crystalline form of **lansoprazole**)

L2 ANSWER 8 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2004:878281 CAPLUS

DOCUMENT NUMBER: 141:355384

TITLE: A **stable** oral benzimidazole formulation

INVENTOR(S): Desai, Jatin; Patel, Pankaj Ramanbhai; Veerababu, Ramabrahammam T.; Jogani, Pranav

PATENT ASSIGNEE(S): Cadila Healthcare Limited, India

SOURCE: PCT Int. Appl., 16 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
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WO 2004089333	A2	20041021	WO 2004-IN50	20040226
WO 2004089333	A3	20050203		
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NA, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW			
RW:	BW, GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG			

PRIORITY APPLN. INFO.: IN 2003-MU237 A 20030228

AB A **stable** oral pharmaceutical composition comprising a benzimidazole compound or its pharmaceutically acceptable salt is described, wherein the active ingredient is coated with an enteric coating polymer and has no separating or protective layer in between. These pellets can be filled into the capsules or compressed into tablets. Further, a method for the manufacture of such a formulation, and the use of such a formulation in medicine is disclosed. For example, sugar beads (1000 g) were coated with a composition containing omeprazole 200 g, hydroxypropyl Me cellulose 240 g, talc 200 g, and water as needed to form pellets. Pellets (500 g) were then enteric coated with a composition containing Eudragit L30D-55 690 g, tri-Et citrate 19.15 g,

talc 24.24 g, 30% ammonia solution as needed for pH 4.5 to 5.5, and water as needed. The coated pellets can be filled in hard gelatin capsules. When tested 99.3 to 100% drug was released within 30 min. The unit dose pellets contained less than 0.7% related substances. The gastro-resistance was found to be 1.81%.

TI A **stable** oral benzimidazole formulation

AB A **stable** oral pharmaceutical composition comprising a benzimidazole compound or its pharmaceutically acceptable salt is described, wherein the active ingredient is coated with an enteric coating polymer and has no separating or protective layer in between. These pellets can be filled into the capsules or compressed into tablets. Further, a method for the manufacture of such a formulation, and the use of such a formulation in medicine is disclosed. For example, sugar beads (1000 g) were coated with a composition containing omeprazole 200 g, hydroxypropyl Me cellulose 240 g, talc 200 g, and water as needed to form pellets. Pellets (500 g) were then enteric coated with a composition containing Eudragit L30D-55 690 g, tri-Et citrate 19.15 g,

talc 24.24 g, 30% ammonia solution as needed for pH 4.5 to 5.5, and water as needed. The coated pellets can be filled in hard gelatin capsules. When tested 99.3 to 100% drug was released within 30 min. The unit dose pellets contained less than 0.7% related substances. The gastro-resistance was found to be 1.81%.

IT Glycerides, biological studies

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(C12-18, polymers with ethylene glycol; preparation of **stable** benzimidazole enteric-coated oral formulations)

IT Monoglycerides

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(C18-unsatd., polymers with ethylene glycol; preparation of **stable** benzimidazole enteric-coated oral formulations)

IT Glycerides, biological studies

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(C8-10, ethoxylated, solubilizer; preparation of **stable** benzimidazole enteric-coated oral formulations)

IT Carbohydrates, biological studies

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(beads, cores; preparation of **stable** benzimidazole enteric-coated

- oral formulations)
- IT Drug delivery systems
(capsules, enteric-coated; preparation of **stable** benzimidazole enteric-coated oral formulations)
- IT Castor oil
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(ethoxylated, Cremophore EL, solubilizer; preparation of **stable** benzimidazole enteric-coated oral formulations)
- IT Glycerides, biological studies
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(medium-chain, solubilizer; preparation of **stable** benzimidazole enteric-coated oral formulations)
- IT Drug delivery systems
(pellets, enteric-coated; preparation of **stable** benzimidazole enteric-coated oral formulations)
- IT Gums and Mucilages
Plasticizers
Solubilizers
(preparation of **stable** benzimidazole enteric-coated oral formulations)
- IT Glycerides, biological studies
Polyoxyalkylenes, biological studies
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(preparation of **stable** benzimidazole enteric-coated oral formulations)
- IT Drug delivery systems
(tablets, enteric-coated; preparation of **stable** benzimidazole enteric-coated oral formulations)
- IT 9003-39-8D, crosslinked
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(Crospovidone; preparation of **stable** benzimidazole enteric-coated oral formulations)
- IT 9005-25-8, Starch, biological studies
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(cores; preparation of **stable** benzimidazole enteric-coated oral formulations)
- IT 79-41-4D, Methacrylic acid, esters, polymers 9004-38-0, Cellulose acetate phthalate 9010-88-2, Ethyl acrylate-methyl methacrylate copolymer 9050-31-1, Hydroxypropyl methyl cellulose phthalate 25212-88-8, Eudragit L30D-55 37205-99-5, Carboxymethyl ethyl cellulose 53237-50-6
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(enteric coating; preparation of **stable** benzimidazole enteric-coated oral formulations)
- IT 9004-34-6, Cellulose, biological studies
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(microcryst., cores; preparation of **stable** benzimidazole enteric-coated oral formulations)
- IT 77-93-0, Triethyl citrate
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(plasticizer; preparation of **stable** benzimidazole enteric-coated oral formulations)
- IT 51-17-2D, Benzimidazole, compds. 57-50-1, Sucrose, biological studies 4070-80-8, Sodium stearyl fumarate 9003-39-8, Polyvinylpyrrolidone 9004-32-4, Carboxymethyl cellulose sodium 9004-64-2, Hydroxypropyl cellulose 9004-65-3, Hydroxypropyl methyl cellulose 9005-65-6, Tween 80 25322-68-3, Polyethylene glycol 31566-31-1, Glyceryl monostearate 73590-58-6, Omeprazole 102625-70-7, Pantoprazole 103577-45-3, Lansoprazole 117976-89-3, Rabeprazole
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(preparation of **stable** benzimidazole enteric-coated oral formulations)

IT 151-21-3, Sodium lauryl sulfate, biological studies
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(solubilizer; preparation of **stable** benzimidazole enteric-coated
oral formulations)

L2 ANSWER 9 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2004:834106 CAPLUS

DOCUMENT NUMBER: 142:397408

TITLE: Preparation and evaluation of inclusion complex of
lansoprazole with 2-HP- β -cyclodextrin and
meglumine

AUTHOR(S): Lee, Jung Woo; Kim, Jung Su; Chang, Hye Jin; Lee, Gye
Won; Jee, Ung Kil

CORPORATE SOURCE: College of Pharmacy, Chungnam National University,
Daejeon, 305-764, S. Korea

SOURCE: Yakche Hakhoechi (2004), 34(4), 269-274

CODEN: YAHAEX; ISSN: 0259-2347

PUBLISHER: Korean Society of Pharmaceutics

DOCUMENT TYPE: Journal

LANGUAGE: Korean

AB To enhance the solubility and stability of **lansoprazole** (LAN), new
proton pump inhibitor, we were prepared various molar ratio of inclusion
complex with 2-hydroxypropyl- β -cyclodextrin (HPCD) and organic alkali
agent, meglumine (MEG). Inclusion complex formation of LAN with HPCD was
investigated by Differential Scanning Calorimetry and X-ray
diffractometry. The aqueous solubilities of inclusion complexes, and the
stabilities of 1:4 and 1:5 inclusion complexes in aqueous solns. containing
different concns. of MEG were examined. The stability of 1:5 LAN-HPCD
inclusion complex containing MEG, which was equaled to amount of LAN, was
performed in 0.9% NaCl and 5% dextrose solution. The formation of inclusion
complex of LAN with HPCD was AL type and the molar ratio of complex was
1:1. The stability constant was 41.557 M⁻¹. As molar ratio of LAN to HPCD
was increased, solubility of inclusion complex was increased. 1:5 LAN-HPCD
inclusion complex was more **stable** than 1:4 LAN-HPCD inclusion
complex. And as contained MEG amount in LAN solution was increased, stability
of 1:4 and 1:5 LAN-HPCD inclusion complexes was improved. Also stability
of 1:5 LAN-HPCD-MEG inclusion complex in 0.9% NaCl solution and 5% dextrose
solution was similar to it in water at room temperature, but it was unstable at
40°C.

TI Preparation and evaluation of inclusion complex of **lansoprazole**
with 2-HP- β -cyclodextrin and meglumine

AB To enhance the solubility and stability of **lansoprazole** (LAN), new
proton pump inhibitor, we were prepared various molar ratio of inclusion
complex with 2-hydroxypropyl- β -cyclodextrin (HPCD) and organic alkali
agent, meglumine (MEG). Inclusion complex formation of LAN with HPCD was
investigated by Differential Scanning Calorimetry and X-ray
diffractometry. The aqueous solubilities of inclusion complexes, and the
stabilities of 1:4 and 1:5 inclusion complexes in aqueous solns. containing
different concns. of MEG were examined. The stability of 1:5 LAN-HPCD
inclusion complex containing MEG, which was equaled to amount of LAN, was
performed in 0.9% NaCl and 5% dextrose solution. The formation of inclusion
complex of LAN with HPCD was AL type and the molar ratio of complex was
1:1. The stability constant was 41.557 M⁻¹. As molar ratio of LAN to HPCD
was increased, solubility of inclusion complex was increased. 1:5 LAN-HPCD
inclusion complex was more **stable** than 1:4 LAN-HPCD inclusion
complex. And as contained MEG amount in LAN solution was increased, stability
of 1:4 and 1:5 LAN-HPCD inclusion complexes was improved. Also stability
of 1:5 LAN-HPCD-MEG inclusion complex in 0.9% NaCl solution and 5% dextrose
solution was similar to it in water at room temperature, but it was unstable at
40°C.

ST **lansoprazole** hydroxypropyl cyclodextrin inclusion complex
meglumine soly

10/773,535

IT Drug delivery systems
(solns.; preparation and evaluation of inclusion complex of
lansoprazole with 2-HP- β -cyclodextrin and meglumine)
IT 57-55-6DP, 1,2-Propanediol, cyclodextrin ethers, **lansoprazole**
complexes 7585-39-9DP, β -Cyclodextrin, hydroxypropyl ethers,
lansoprazole complexes 103577-45-3DP, **Lansoprazole**,
complexes with hydroxypropyl cyclodextrin
RL: SPN (Synthetic preparation); THU (Therapeutic use); BIOL (Biological
study); PREP (Preparation); USES (Uses)
(preparation and evaluation of inclusion complex of **lansoprazole**
with 2-HP- β -cyclodextrin and meglumine)
IT 6284-40-8, Meglumine
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(preparation and evaluation of inclusion complex of **lansoprazole**
with 2-HP- β -cyclodextrin and meglumine)

L2 ANSWER 10 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2004:696366 CAPLUS
DOCUMENT NUMBER: 141:212763
TITLE: Method of stabilizing **lansoprazole**
INVENTOR(S): Singer, Claude; Liberman, Anita; Veinberg, Irena
PATENT ASSIGNEE(S): Teva Pharmaceutical Industries Ltd., Israel; Teva
Pharmaceuticals Usa, Inc.
SOURCE: PCT Int. Appl., 23 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 2
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2004072061	A1	20040826	WO 2004-US3603	20040205
W:	AE, AE, AG, AL, AL, AM, AM, AM, AT, AT, AU, AZ, AZ, BA, BB, BG, BG, BR, BR, BW, BY, BY, BZ, BZ, CA, CH, CN, CN, CO, CO, CR, CR, CU, CU, CZ, CZ, DE, DE, DK, DK, DM, DZ, EC, EC, EE, EE, EG, ES, ES, FI, FI, GB, GD, GE, GE, GH, GM, HR, HR, HU, HU, ID, IL, IN, IS, JP, JP, KE, KE, KG, KG, KP, KP, KR, KR, KZ, KZ, KZ, LC, LK, LR, LS, LS, LT, LU, LV, MA, MD, MD, MG, MK, MN, MW, MX, MX, MZ, MZ, NA, NI			
RW:	BW, GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG			
EP 1485373	A1	20041215	EP 2004-708666	20040205
R:	AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO, MK, CY, AL, TR, BG, CZ, EE, HU, SK			
US 2005020638	A1	20050127	US 2004-773535	20040205
PRIORITY APPLN. INFO.:			US 2003-445219P	P 20030205
			WO 2004-US3603	W 20040205

AB The present invention provides a **stable** 2-(2-pyridylmethyl)sulfinyl-1H-benzimidazole (**lansoprazole**) and a method for stabilizing **lansoprazole** by use of a weakly basic material. The present invention also provides a method for the preparation of a **stable lansoprazole**. **Lansoprazole** was prepared by oxidation its thio analog and purified with a solution of EtOH, NH₃, and water.

TI Method of stabilizing **lansoprazole**

AB The present invention provides a **stable** 2-(2-pyridylmethyl)sulfinyl-1H-benzimidazole (**lansoprazole**) and a

method for stabilizing **lansoprazole** by use of a weakly basic material. The present invention also provides a method for the preparation of a **stable lansoprazole**. **Lansoprazole** was prepared by oxidation its thio analog and purified with a solution of EtOH,

NH₃,

and water.

ST **lansoprazole** stabilization purifn prepn

IT Crystallization

(stabilizing **lansoprazole**)

IT Acids, processes

Amines, processes

RL: PEP (Physical, engineering or chemical process); PYP (Physical process); PROC (Process)

(stabilizing **lansoprazole**)

IT 131926-99-3P, 1H-Benzimidazole, 2-[[[3-methyl-4-(2,2,2-trifluoroethoxy)-2-pyridinyl]methyl]sulfonyl-

RL: BYP (Byproduct); PREP (Preparation)

(stabilizing **lansoprazole**)

IT 64-17-5, Ethanol, processes 64-18-6, Formic acid, processes 64-19-7,

Acetic acid, processes 67-56-1, Methanol, processes 67-63-0,

2-Propanol, processes 67-64-1, Acetone, processes 68-12-2, Dmf,

processes 71-23-8, 1-Propanol, processes 74-89-5, Methylamine,

processes 78-93-3, 2-Butanone, processes 102-71-6, Triethanolamine,

processes 109-89-7, Diethylamine, processes 109-99-9, Thf, processes

111-42-2, Diethanolamine, processes 121-44-8, Triethylamine, processes

1336-21-6, Ammonium hydroxide 7647-01-0, Hydrochloric acid, processes

7664-41-7, Ammonia, processes

RL: PEP (Physical, engineering or chemical process); PYP (Physical process); PROC (Process)

(stabilizing **lansoprazole**)

IT 103577-45-3P, **Lansoprazole**

RL: PRP (Properties); PUR (Purification or recovery); SPN (Synthetic preparation); THU (Therapeutic use); BIOL (Biological study); PREP

(Preparation); USES (Uses)

(stabilizing **lansoprazole**)

IT 103577-40-8, 1H-Benzimidazole, 2-[[[3-methyl-4-(2,2,2-trifluoroethoxy)-2-pyridinyl]methyl]thio-

RL: RCT (Reactant); RACT (Reactant or reagent)

(stabilizing **lansoprazole**)

L2 ANSWER 11 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2004:648368 CAPLUS

DOCUMENT NUMBER: 141:179632

TITLE: **Stable** oral benzimidazole compositions

INVENTOR(S): Mehta, Kamal; Mathur, Rajeev Shanker; Sethi, Sanjeev Kumar; Malik, Rajiv; Gandhi, Rajesh; Isloor, Shashikanth; Malik, Rajiv

PATENT ASSIGNEE(S): Ranbaxy Laboratories Limited, India

SOURCE: PCT Int. Appl., 38 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2004066982	A1	20040812	WO 2004-IB235	20040202
W:	AE, AE, AG, AL, AL, AM, AM, AM, AT, AT, AU, AZ, AZ, BA, BB, BG, BG, BR, BR, BW, BY, BY, BZ, BZ, CA, CH, CN, CN, CO, CO, CR, CR, CU, CU, CZ, CZ, DE, DE, DK, DK, DM, DZ, EC, EC, EE, EE, EG, ES, ES, FI, FI, GB, GD, GE, GE, GH, GM, HR, HR, HU, HU, ID, IL, IN,			

IS, JP, JP, KE, KE, KG, KG, KP, KP, KP, KR, KR, KZ, KZ, KZ, LC,
LK, LR, LS, LS, LT, LU, LV, MA, MD, MD, MG, MK, MN, MW, MX, MX,
MZ, MZ, NA, NI

PRIORITY APPLN. INFO.: IN 2003-DE80 A 20030131
IN 2003-DE728 A 20030527

AB The present invention relates to **stable** oral benzimidazole compns. and processes for their preparation The **stable** oral benzimidazole pharmaceutical composition includes a core, a separating layer, and an

enteric coating. The core includes a benzimidazole compound, a substantially water-soluble material and, optionally excipients, wherein the core is not alkaline The separating layer surrounds the core and includes a substantially water-soluble material and, excipients. The enteric coating surrounds the separating layer. At least one of the core and the separating layer

includes the substantially water-soluble material without any excipients. Thus, an enteric coating comprised Eudragit L30D55 114.39, PEG-300 3.43, talc 12.12, TiO2 4.04 mg and water qs.

TI **Stable** oral benzimidazole compositions

AB The present invention relates to **stable** oral benzimidazole compns. and processes for their preparation The **stable** oral benzimidazole pharmaceutical composition includes a core, a separating layer, and an

enteric coating. The core includes a benzimidazole compound, a substantially water-soluble material and, optionally excipients, wherein the core is not alkaline The separating layer surrounds the core and includes a substantially water-soluble material and, excipients. The enteric coating surrounds the separating layer. At least one of the core and the separating layer

includes the substantially water-soluble material without any excipients. Thus, an enteric coating comprised Eudragit L30D55 114.39, PEG-300 3.43, talc 12.12, TiO2 4.04 mg and water qs.

ST **Stable** oral benzimidazole pharmaceutical

IT Drug delivery systems
(capsules, enteric-coated; **stable** oral benzimidazole compns.)

IT Drug delivery systems
(enteric-coated; **stable** oral benzimidazole compns.)

IT Drug delivery systems
(oral; **stable** oral benzimidazole compns.)

IT Binders
Gums and Mucilages
Lubricants
(**stable** oral benzimidazole compns.)

IT Alditols
Carbohydrates, biological studies
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(**stable** oral benzimidazole compns.)

IT Drug delivery systems
(tablets, enteric-coated; **stable** oral benzimidazole compns.)

IT Polymers, biological studies
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(water-soluble; **stable** oral benzimidazole compns.)

IT 9004-34-6, Cellulose, biological studies
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(microcryst.; **stable** oral benzimidazole compns.)

IT 50-70-4, Sorbitol, biological studies 50-99-7, Dextrose, biological studies 57-50-1, Sucrose, biological studies 63-42-3, Lactose 69-65-8, Mannitol 87-99-0, Xylitol 557-04-0 4070-80-8, Sodium stearyl fumarate 7631-86-9, Silica, biological studies 9000-01-5, Gum arabic 9000-65-1, Gum tragacanth 9003-39-8, Polyvinylpyrrolidone 9004-34-6D, Cellulose, derivs. 9004-64-2, Hydroxypropyl cellulose 9004-65-3, Hydroxypropyl methyl cellulose 9004-67-5 9005-25-8, Starch,

biological studies 9005-25-8D, Starch, derivs. 9063-38-1, Sodium starch glycolate 11138-66-2, Xanthan gum 14807-96-6, Talc, biological studies 25086-89-9, Vinyl acetate-vinylpyrrolidone copolymer 25212-88-8, Eudragit L30D 55 73590-58-6, Omeprazole 74811-65-7, Croscarmellose sodium 102625-70-7, Pantoprazole 103577-45-3, **Lansoprazole** 117976-89-3, Rabeprazole 198085-73-3, Pearlitol SD 200 444902-50-5, Acryl-Eze
 RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (stable oral benzimidazole compns.)

L2 ANSWER 12 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2004:565090 CAPLUS

DOCUMENT NUMBER: 141:111579

TITLE: Controlled release formulation comprising benzimidazole derivatives with increased stability

INVENTOR(S): Jee, Ung Kil; Hwang, Sung Joo; Park, Jin Kyu; Park, Kyung Lae; Moon, Young Girl; Kwon, Yong Jin

PATENT ASSIGNEE(S): Centurion, Inc., S. Korea

SOURCE: PCT Int. Appl., 44 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2004058257	A1	20040715	WO 2003-KR659	20030402
W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NI, NO, NZ, OM, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG				

PRIORITY APPLN. INFO.: KR 2002-87300 A 20021230

AB Disclosed is a controlled release formulation with increased stability and a method of preparation The controlled release formulation comprises a pellet including a benzimidazole derivative or a pharmaceutically acceptable salt thereof as an active ingredient and a cationic polymer, and at least one coating layer selected from an intermediate coating layer, a moisture-resistant coating layer and an enteric coating layer as an outer layer surrounding the pellet. The controlled release formulation electrostatically stabilizes benzimidazole derivs. or pharmaceutically acceptable salts thereof, and thus exhibits excellent resistance to acidic and aqueous environments. A composition was prepared containing chitosan, **lansoprazole**, Na lauryl sulfate Na H phosphate, Avicel PH-102, L-HPC LH11, mannitol, HPMC, HPMCP, and cetyl alc. to form controlled release pellets.

AB Disclosed is a controlled release formulation with increased stability and a method of preparation The controlled release formulation comprises a pellet including a benzimidazole derivative or a pharmaceutically acceptable salt thereof as an active ingredient and a cationic polymer, and at least one coating layer selected from an intermediate coating layer, a moisture-resistant coating layer and an enteric coating layer as an outer layer surrounding the pellet. The controlled release formulation electrostatically stabilizes benzimidazole derivs. or pharmaceutically acceptable salts thereof, and thus exhibits excellent resistance to acidic and aqueous environments. A composition was prepared containing chitosan,

lansoprazole, Na lauryl sulfate Na H phosphate, Avicel PH-102, L-HPC LH11, mannitol, HPMC, HPMCP, and cetyl alc. to form controlled release pellets.

ST controlled release pellet benzimidazole deriv **stable**

IT 103577-45-3, **Lansoprazole**

RL: PRP (Properties); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(controlled release formulation comprising benzimidazole derivs. with increased stability)

L2 ANSWER 13 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2004:453656 CAPLUS

DOCUMENT NUMBER: 141:116452

TITLE: Chemistry of Covalent Inhibition of the Gastric (H+, K+)-ATPase by Proton Pump Inhibitors

AUTHOR(S): Shin, Jai Moo; Cho, Young Moon; Sachs, George

CORPORATE SOURCE: Department of Physiology and Medicine, University of California, Los Angeles, CA, 90073, USA

SOURCE: Journal of the American Chemical Society (2004), 126(25), 7800-7811

CODEN: JACSAT; ISSN: 0002-7863

PUBLISHER: American Chemical Society

DOCUMENT TYPE: Journal

LANGUAGE: English

OTHER SOURCE(S): CASREACT 141:116452

AB Proton pump inhibitors (PPIs), drugs that are widely used for treatment of acid related diseases, are either substituted pyridylmethylsulfinyl benzimidazole or imidazopyridine derivs. They are all prodrugs that inhibit the acid-secreting gastric (H+, K+)-ATPase by acid activation to reactive thiophiles that form disulfide bonds with one or more cysteines accessible from the exoplasmic surface of the enzyme. This unique acid-catalysis mechanism had been ascribed to the nucleophilicity of the pyridine ring. However, the data obtained here show that their conversion to the reactive cationic thiophilic sulfenic acid or sulfenamide depends mainly not on pyridine protonation but on a second protonation of the imidazole component that increases the electrophilicity of the C-2 position on the imidazole. This protonation results in reaction of the C-2 with the unprotonated fraction of the pyridine ring to form the reactive derivs. The relevant PPI pKa's were determined by UV spectroscopy of the benzimidazole or imidazopyridine sulfinylmethyl moieties at different medium pH. Synthesis of a relatively acid **stable** analog, N1-Me **lansoprazole**, allowed direct determination of both pKa values of this intact PPI allowing calcn. of the two pKa values for all the PPIs. These values predict their relative acid stability and thus the rate of reaction with cysteines of the active proton pump at the pH of the secreting parietal cell. The PPI accumulates in the secretory canaliculus of the parietal cell due to pyridine protonation then binds to the pump and is activated by the second protonation on the surface of the protein to allow disulfide formation.

REFERENCE COUNT: 20 THERE ARE 20 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

AB Proton pump inhibitors (PPIs), drugs that are widely used for treatment of acid related diseases, are either substituted pyridylmethylsulfinyl benzimidazole or imidazopyridine derivs. They are all prodrugs that inhibit the acid-secreting gastric (H+, K+)-ATPase by acid activation to reactive thiophiles that form disulfide bonds with one or more cysteines accessible from the exoplasmic surface of the enzyme. This unique acid-catalysis mechanism had been ascribed to the nucleophilicity of the pyridine ring. However, the data obtained here show that their conversion to the reactive cationic thiophilic sulfenic acid or sulfenamide depends mainly not on pyridine protonation but on a second protonation of the imidazole component that increases the electrophilicity of the C-2

position on the imidazole. This protonation results in reaction of the C-2 with the unprotonated fraction of the pyridine ring to form the reactive derivs. The relevant PPI pKa's were determined by UV spectroscopy of the benzimidazole or imidazopyridine sulfinylmethyl moieties at different medium pH. Synthesis of a relatively acid **stable** analog, N1-Me **lansoprazole**, allowed direct determination of both pKa values of this intact PPI allowing calcn. of the two pKa values for all the PPIs. These values predict their relative acid stability and thus the rate of reaction with cysteines of the active proton pump at the pH of the secreting parietal cell. The PPI accumulates in the secretory canaliculus of the parietal cell due to pyridine protonation then binds to the pump and is activated by the second protonation on the surface of the protein to allow disulfide formation.

IT 102625-70-7, Pantoprazole 103577-45-3, **Lansoprazole**
117976-89-3, Rabeprazole

RL: PAC (Pharmacological activity); PRP (Properties); THU (Therapeutic use); BIOL (Biological study); USES (Uses).

(chemical of covalent inhibition of gastric (H⁺, K⁺)-ATPase by proton pump inhibitors)

L2 ANSWER 14 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2004:453207 CAPLUS

DOCUMENT NUMBER: 141:12318

TITLE: **Stable lansoprazole** containing
more than 500-3000 ppm water and 200-5000 ppm alcohol

INVENTOR(S): Singer, Claude; Liberman, Anita; Veinberg, Irena

PATENT ASSIGNEE(S): Teva Pharmaceutical Industries Ltd., Israel; Teva Pharmaceuticals USA, Inc.

SOURCE: PCT Int. Appl., 24 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 2

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2004046135	A1	20040603	WO 2003-US37164	20031118
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BW, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NI, NO, NZ, OM, PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW			
RW:	BW, GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PT, RO, SE, SI, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG			
EP 1465890	A1	20041013	EP 2003-789888	20031118
R:	AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO, MK, CY, AL, TR, BG, CZ, EE, HU, SK			
US 2004215021	A1	20041028	US 2003-717325	20031118
PRIORITY APPLN. INFO.:			US 2002-427589P	P 20021118
			US 2003-445219P	P 20030205
			WO 2003-US37164	W 20031118

AB The present invention provides a **stable lansoprazole** comprising either 500-3000 ppm water and 200-5000 ppm alc., or both. The present invention provides a method of preparing a **stable lansoprazole** as well as a pharmaceutical composition containing same. The present invention further provides a method of purifying **lansoprazole** that is substantially free of sulfone and sulfide derivs.

10/773,535

TI **Stable lansoprazole** containing more than 500-3000 ppm
water and 200-5000 ppm alcohol

AB The present invention provides a **stable lansoprazole**
comprising either 500-3000 ppm water and 200-5000 ppm alc., or both. The
present invention provides a method of preparing a **stable**
lansoprazole as well as a pharmaceutical composition containing same. The
present invention further provides a method of purifying
lansoprazole that is substantially free of sulfone and sulfide
derivs.

ST **lansoprazole** compn **stable** water alc

IT Crystallization
Drug delivery systems
(**stable lansoprazole** containing more than 500-3000 ppm
water and 200-5000 ppm alc.)

IT Drug delivery systems
(tablets; **stable lansoprazole** containing more than
500-3000 ppm water and 200-5000 ppm alc.)

IT 7732-18-5, Water, uses
RL: NUU (Other use, unclassified); USES (Uses)
(**stable lansoprazole** containing more than 500-3000 ppm
water and 200-5000 ppm alc.)

IT 64-17-5, Ethanol, uses
RL: NUU (Other use, unclassified); PEP (Physical, engineering or chemical
process); PYP (Physical process); PROC (Process); USES (Uses)
(**stable lansoprazole** containing more than 500-3000 ppm
water and 200-5000 ppm alc.)

IT 103577-45-3, **Lansoprazole**
RL: PEP (Physical, engineering or chemical process); PRP (Properties); PYP
(Physical process); THU (Therapeutic use); BIOL (Biological study); PROC
(Process); USES (Uses)
(**stable lansoprazole** containing more than 500-3000 ppm
water and 200-5000 ppm alc.)

IT 64-18-6, Formic acid, processes 64-19-7, Acetic acid, processes
67-56-1, Methanol, processes 67-63-0, 2-Propanol, processes 67-64-1,
Acetone, processes 68-12-2, Dmf, processes 71-23-8, 1-Propanol,
processes 74-89-5, Methylamine, processes 78-93-3, 2-Butanone,
processes 102-71-6, Triethanolamine, processes 105-58-8, Diethyl
carbonate 109-89-7, Diethylamine, processes 109-99-9, Thf, processes
111-42-2, Diethanolamine, processes 121-44-8, Triethylamine, processes
616-38-6, Dimethyl carbonate 1336-21-6, Ammonium hydroxide 7647-01-0,
Hydrochloric acid, processes 7664-41-7, Ammonia, processes
RL: PEP (Physical, engineering or chemical process); PYP (Physical
process); PROC (Process)
(**stable lansoprazole** containing more than 500-3000 ppm
water and 200-5000 ppm alc.)

L2 ANSWER 15 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2004:354792 CAPLUS

DOCUMENT NUMBER: 140:327137

TITLE: **Stable** solid preparations containing
amorphous benzimidazoles and salts

INVENTOR(S): Nonomura, Muneo; Ito, Hiroki; Hashimoto, Hideo; Urai,
Tadashi

PATENT ASSIGNEE(S): Takeda Chemical Industries, Ltd., Japan

SOURCE: PCT Int. Appl., 51 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: Japanese

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.

KIND DATE

APPLICATION NO.

DATE

WO 2004035052 A1 20040429 WO 2003-JP13152 20031015

W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN,
CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, EG, ES, FI, GB, GD, GE,
GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KR, KZ, LC, LK, LR,
LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NI, NO, NZ, OM,
PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM, TN,
TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW

RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY,
KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES,
FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PT, RO, SE, SI, SK, TR,
BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG

JP 2004155773 A2 20040603 JP 2003-354904 20031015

PRIORITY APPLN. INFO.: JP 2002-301893 A 20021016

OTHER SOURCE(S): MARPAT 140:327137

AB It is intended to provide a process for producing unstable amorphous benzimidazole compds. having a proton pump inhibitor function, and **stable** solid preps. for medicinal use containing these compds. which are produced by blending such an amorphous benzimidazole compound with a nontoxic base such as a basic inorg. salt, forming an intermediate coating layer on the layer containing the active ingredient and further forming an enteric coating layer or a release-controlling coating layer. For example, granules were formulated containing amorphous (R)-**lansoprazole**, MgCO₃, and excipients, treated with an enteric-soluble coating composition containing methacrylate copolymer, then filled into capsules.

REFERENCE COUNT: 164 THERE ARE 164 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

TI **Stable** solid preparations containing amorphous benzimidazoles and salts

AB It is intended to provide a process for producing unstable amorphous benzimidazole compds. having a proton pump inhibitor function, and **stable** solid preps. for medicinal use containing these compds. which are produced by blending such an amorphous benzimidazole compound with a nontoxic base such as a basic inorg. salt, forming an intermediate coating layer on the layer containing the active ingredient and further forming an enteric coating layer or a release-controlling coating layer. For example, granules were formulated containing amorphous (R)-**lansoprazole**, MgCO₃, and excipients, treated with an enteric-soluble coating composition containing methacrylate copolymer, then filled into capsules.

ST amorphous benzimidazole proton pump inhibitor salt granule stability; **lansoprazole** magnesium carbonate granule enteric coating capsule

IT Drug delivery systems
(capsules; **stable** solid preps. containing amorphous benzimidazole proton pump inhibitors and salts)

IT Transport proteins
RL: BSU (Biological study, unclassified); BIOL (Biological study)
(proton pump, inhibitors; **stable** solid preps. containing amorphous benzimidazole proton pump inhibitors and salts)

IT Drug delivery systems
(solids, enteric-coated; **stable** solid preps. containing amorphous benzimidazole proton pump inhibitors and salts)

IT 313640-86-7
RL: PRP (Properties); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(**stable** solid preps. containing amorphous benzimidazole proton pump inhibitors and salts)

IT 144-55-8, Sodium hydrogen carbonate, biological studies 471-34-1, Calcium carbonate, biological studies 497-19-8, Sodium carbonate, biological studies 546-93-0, Magnesium carbonate 1309-42-8, Magnesium

hydroxide 1309-48-4, Magnesia, biological studies 1343-88-0, Magnesium
 silicate 7647-14-5, Sodium chloride, biological studies 12304-65-3,
 Hydrotalcite 21645-51-2, Aluminum hydroxide, biological studies
 119141-88-7, S-Omeprazole 119141-89-8 138530-94-6 138530-95-7, S-
Lansoprazole 142678-35-1, S-Pantoprazole 142706-18-1
 177795-59-4, S-Rabeprazole 177795-60-7
 RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (stable solid preps. containing amorphous benzimidazole proton
 pump inhibitors and salts)

L2 ANSWER 16 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2004:162580 CAPLUS

DOCUMENT NUMBER: 140:187434

TITLE: A process for manufacture of **stable** oral
 multiple unit pharmaceutical composition containing
 benzimidazoles

INVENTOR(S): Antarkar, Amit Krishna; Abdul Sattar Abdul, Javed;
 Lala Rajendra, Ghanshamlal; Joshi Ketaki, Kishore;
 Gadkari Parag, Narayan; Thanawala Gaurang, Hasmukhlal;
 Shah Maya, Janak; Shah Janak, Ramanlal

PATENT ASSIGNEE(S): Themis Laboratories Private Limited, India

SOURCE: PCT Int. Appl., 21 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2004016242	A2	20040226	WO 2003-IB3514	20030804
WO 2004016242	A3	20040408		
WO 2004016242	C1	20041007		

W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN,
 CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH,
 GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR,
 LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NI, NO, NZ, OM,
 PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM, TN,
 TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW

RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY,
 KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES,
 FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PT, RO, SE, SI, SK, TR,
 BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG

EP 1530460 A2 20050518 EP 2003-787961 20030804

R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT,
 IE, SI, LT, LV, FI, RO, MK, CY, AL, TR, BG, CZ, EE, HU, SK

PRIORITY APPLN. INFO.: IN 2002-MU742 A 20020816
 WO 2003-IB3514 W 20030804

AB This invention relates to process for manufacture of a **stable**, oral,
 multiple unit pharmaceutical composition containing high concentration of
 benzimidazole up
 to 40% by weight without the use of micronized benzimidazole, disintegrating
 agent and fillers. Surfactants in these compns. are in enteric polymer
 layer and not in contact with benzimidazole. Multiple unit pharmaceutical
 composition of the invention shows min. acid degradation in 0.1 N HCl after 2
 h and

pH 6.8 buffer release of more than 85% after 45 min. The multiple unit
 pharmaceutical composition is in the form unagglomerated, uniformly shaped and
 sized enteric-coated pellets, which are processed continuously or in
 batches in single equipment such as fluid bed bottom spray processor. The
 invention involves sequential deposition of alkaline material layer on
 non-pareil seeds to obtain treated non-pareil seeds, drug layer to obtain

drug pellets, sealant polymer layer to obtain sealed pellets, and enteric polymer layer to obtain enteric coated pellets. The enteric-coated pellets obtained are capable of being filled in smallest size capsules for ease of administration and patient acceptance. Enteric-coated pellets contained omeprazole 24.5, non-pareil seeds 32.3, HPMC-E15 7.3, NaOH 3.2, talc 3.7, and water qs to 100%.

TI A process for manufacture of **stable** oral multiple unit pharmaceutical composition containing benzimidazoles

AB This invention relates to process for manufacture of a **stable**, oral, multiple unit pharmaceutical composition containing high concentration of benzimidazole up

to 40% by weight without the use of micronized benzimidazole, disintegrating agent and fillers. Surfactants in these compns. are in enteric polymer layer and not in contact with benzimidazole. Multiple unit pharmaceutical composition of the invention shows min. acid degradation in 0.1 N HCl after 2

h and

pH 6.8 buffer release of more than 85% after 45 min. The multiple unit pharmaceutical composition is in the form unagglomerated, uniformly shaped and sized enteric-coated pellets, which are processed continuously or in batches in single equipment such as fluid bed bottom spray processor. The invention involves sequential deposition of alkaline material layer on non-pareil seeds to obtain treated non-pareil seeds, drug layer to obtain drug pellets, sealant polymer layer to obtain sealed pellets, and enteric polymer layer to obtain enteric coated pellets. The enteric-coated pellets obtained are capable of being filled in smallest size capsules for ease of administration and patient acceptance. Enteric-coated pellets contained omeprazole 24.5, non-pareil seeds 32.3, HPMC-E15 7.3, NaOH 3.2, talc 3.7, and water qs to 100%.

IT Drug delivery systems

(capsules; manufacture of **stable** oral multiple unit pharmaceutical compns. containing benzimidazoles)

IT Binders

Dissolution

Drug bioavailability

Drug bioequivalence

Fillers

Human

Plasticizers

Surfactants

(manufacture of **stable** oral multiple unit pharmaceutical compns. containing benzimidazoles)

IT Alkali metal hydroxides

RL: PEP (Physical, engineering or chemical process); PYP (Physical process); PROC (Process)

(manufacture of **stable** oral multiple unit pharmaceutical compns. containing benzimidazoles)

IT Polymers, biological studies

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(manufacture of **stable** oral multiple unit pharmaceutical compns. containing benzimidazoles)

IT Drug delivery systems

(oral; manufacture of **stable** oral multiple unit pharmaceutical compns. containing benzimidazoles)

IT Drug delivery systems

(pellets, enteric-coated; manufacture of **stable** oral multiple unit pharmaceutical compns. containing benzimidazoles)

IT Drug delivery systems

(tablets, enteric-coated; manufacture of **stable** oral multiple unit pharmaceutical compns. containing benzimidazoles)

IT 1305-62-0, Calcium hydroxide, processes 1309-42-8, Magnesium hydroxide
1310-58-3, Potassium hydroxide, processes 1310-73-2, Sodium hydroxide,
processes 1336-21-6, Ammonium hydroxide

RL: PEP (Physical, engineering or chemical process); PYP (Physical process); PROC (Process)

(manufacture of **stable** oral multiple unit pharmaceutical compns. containing benzimidazoles)

IT 51-17-2D, Benzimidazole, derivs. 73590-58-6, Omeprazole 103577-45-3, **Lansoprazole**

RL: PKT (Pharmacokinetics); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(manufacture of **stable** oral multiple unit pharmaceutical compns. containing benzimidazoles)

IT 79-41-4D, Methacrylic acid, polymers 546-93-0, Magnesium carbonate 7631-86-9, Silicon dioxide, biological studies 9003-39-8, Polyvinylpyrrolidone 9004-32-4, Sodium carboxymethyl cellulose 9004-64-2, Hydroxypropyl cellulose 9004-65-3, Hydroxypropyl methyl cellulose 9004-67-5, Methyl cellulose 14807-96-6, Talc, biological studies 18641-57-1, Glyceryl behenate 31566-31-1, Glyceryl monostearate

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(manufacture of **stable** oral multiple unit pharmaceutical compns. containing benzimidazoles)

L2 ANSWER 17 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2004:119766 CAPLUS

DOCUMENT NUMBER: 140:152014

TITLE: Enteric coated oral pharmaceutical compositions of acid-unstable drugs

INVENTOR(S): Deshpande, Jayant Venkatesh; Gupte, Vandana Sandeep; Kadam, Vaishali Madhukar; Gosar, Chandrakant Thakarsi; Deshmukh, Satish Ramachandra; Gupte, Rajan Vitthal; Tamhankar, Vijay Ramachandra

PATENT ASSIGNEE(S): Koprana Research Laboratories Limited, India

SOURCE: U.S. Pat. Appl. Publ., 8 pp.

CODEN: USXXCO

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
US 2004028737	A1	20040212	US 2002-216315	20020812
PRIORITY APPLN. INFO.:			US 2002-216315	20020812

AB Enteric coated **stable** oral pharmaceutical compns. of acid-unstable drugs are described. The enteric coating is a bilayer with a pH gradient across its thickness comprising an inner layer of neutral or near neutral pH 7-7.5 and an outer layer of acidic pH 2-6. The enteric coating is first carried out at neutral or near neutral pH of 7-7.5 to form an inner layer of neutral or near neutral pH and then at acidic pH of 2-6 to form an outer layer of acidic pH. Tablets of the following composition were prepared: omeprazole 10.30, anhydrous lactose 55.00, Mg stearate 1.00, talc 1.00, colloidal silicon dioxide 0.50, microcryst. cellulose 17.00, corn starch 10.00, and Povidone 3.00 mg. The tablets were enteric coated with the following aqueous organic dispersion of enteric coating material at neutral pH 7: methacrylate copolymer type C 0.4, PEG-600 0.04, Polysorbate-80 0.02, titanium dioxide 0.05, and talc 0.165 kg, iso-Pr alc. 4.0 and Water 0.375 L.

AB Enteric coated **stable** oral pharmaceutical compns. of acid-unstable drugs are described. The enteric coating is a bilayer with a pH gradient across its thickness comprising an inner layer of neutral or near neutral pH 7-7.5 and an outer layer of acidic pH 2-6. The enteric coating is first carried out at neutral or near neutral pH of 7-7.5 to form an inner layer of neutral or near neutral pH and then at acidic pH of

2-6' to form an outer layer of acidic pH. Tablets of the following composition were prepared: omeprazole 10.30, anhydrous lactose 55.00, Mg stearate 1.00, talc 1.00, colloidal silicon dioxide 0.50, microcryst. cellulose 17.00, corn starch 10.00, and Povidone 3.00 mg. The tablets were enteric coated with the following aqueous organic dispersion of enteric coating material at neutral pH 7: methacrylate copolymer type C 0.4, PEG-600 0.04, Polysorbate-80 0.02, titanium dioxide 0.05, and talc 0.165 kg, iso-Pr alc. 4.0 and Water 0.375 L.

IT 51-17-2D, Benzimidazole, derivs. 59-92-7, Levodopa, biological studies
61-32-5, Methicillin 79-41-4D, Methacrylic acid, esters, polymers
114-07-8, Erythromycin 1406-05-9, Penicillin 4697-36-3, Carbenicillin
8049-47-6, Pancreatin 9004-10-8, Insulin, biological studies
20830-75-5, Digoxin 65277-42-1, Ketoconazole 69655-05-6, Didanosine
73590-58-6, Omeprazole 81093-37-0, Pravastatin 84625-61-6,
Itraconazole 102625-70-7, Pantoprazole 103577-45-3,
Lansoprazole 117976-89-3, Rabeprazole
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(enteric coated oral pharmaceutical compns. of acid-unstable drugs)

L2 ANSWER 18 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2004:60341 CAPLUS

DOCUMENT NUMBER: 140:117406

TITLE: Liquid dosage compositions of **stable**
nanoparticulate drugs

INVENTOR(S): Bosch, William H.; Hilborn, Matthew R.; Hovey, Douglas
C.; Kline, Laura J.; Lee, Robert W.; Pruitt, John D.;
Ryde, Niels P.; Ryde, Tuula A.; Xu, Shuqian

PATENT ASSIGNEE(S): Elan Pharma International, Ltd, Ire.

SOURCE: PCT Int. Appl., 68 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 16

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2004006959	A1	20040122	WO 2003-US22187	20030716
WO 2004006959	C1	20050331		

W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN,
CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH,
GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR,
LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NI, NO, NZ, OM,
PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM, TN,
TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW
RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY,
KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES,
FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PT, RO, SE, SI, SK, TR,
BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG

CA 2492488	AA	20040122	CA 2003-2492488	20030716
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PRIORITY APPLN. INFO.: US 2002-396530P P 20020716

WO 2003-US22187 W 20030716

AB The present invention relates to liquid dosage compns. of **stable**
nanoparticulate drugs. The liquid dosage compns. of the invention include
osmotically active crystal growth inhibitors that stabilize the
nanoparticulate active agents against crystal and particle size growth of
the drug. Thus, an aqueous nanoparticulate colloidal dispersion (NCD)
comprising drug 32.5 Copovidone 6.5, and dioctyl sodium sulfosuccinate
0.464% by weight was prepared by milling for 3.8 h under high energy milling
conditions. The final mean particle size (by weight) of the drug particles
was 161 nm. The concentrated NCD was then diluted with preserved water and
glycerol (the osmotically active crystal growth inhibitor) to 0.5-3.0%

drug.

REFERENCE COUNT: 4 THERE ARE 4 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

TI Liquid dosage compositions of **stable** nanoparticulate drugs

AB The present invention relates to liquid dosage compns. of **stable** nanoparticulate drugs. The liquid dosage compns. of the invention include osmotically active crystal growth inhibitors that stabilize the nanoparticulate active agents against crystal and particle size growth of the drug. Thus, an aqueous nanoparticulate colloidal dispersion, (NCD) comprising drug 32.5 Copovidone 6.5, and dioctyl sodium sulfosuccinate 0.464% by weight was prepared by milling for 3.8 h under high energy milling conditions. The final mean particle size (by weight) of the drug particles was 161 nm. The concentrated NCD was then diluted with preserved water and glycerol (the osmotically active crystal growth inhibitor) to 0.5-3.0% drug.

ST liq dosage **stable** nanoparticulate drug

IT Inflammation
(Crohn's disease; liquid dosage compns. of **stable** nanoparticulate drugs)

IT Intestine, disease
(Crohn's; liquid dosage compns. of **stable** nanoparticulate drugs)

IT Alcohols, biological studies
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(C16-18, ethoxylated; liquid dosage compns. of **stable** nanoparticulate drugs)

IT Alcohols, biological studies
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(C16-18; liquid dosage compns. of **stable** nanoparticulate drugs)

IT Arthritis
(Reiter's syndrome; liquid dosage compns. of **stable** nanoparticulate drugs)

IT Drug delivery systems
(aerosols; liquid dosage compns. of **stable** nanoparticulate drugs)

IT Diagnosis
(agents; liquid dosage compns. of **stable** nanoparticulate drugs)

IT Polyoxyalkylenes, biological studies
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(alkyl group-terminated; liquid dosage compns. of **stable** nanoparticulate drugs)

IT Quaternary ammonium compounds, biological studies
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(alkylbenzyltrimethyl, chlorides; liquid dosage compns. of **stable** nanoparticulate drugs)

IT Quaternary ammonium compounds, biological studies
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(alkyltrimethyl, chlorides; liquid dosage compns. of **stable** nanoparticulate drugs)

IT Quaternary ammonium compounds, biological studies
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(alkyltrimethyl, ethoxylated; liquid dosage compns. of **stable** nanoparticulate drugs)

IT Fats and Glyceridic oils, biological studies
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(animal, marine; liquid dosage compns. of **stable** nanoparticulate drugs)

IT Inflammation
Spinal column, disease
(ankylosing spondylitis; liquid dosage compns. of **stable** nanoparticulate drugs)

IT Polyethers, biological studies

138402-11-6, Irbesartan 139481-59-7, Candesartan 139755-83-2,
 Sildenafil 144034-80-0, Rizatriptan 145599-86-6, Cerivastatin
 147059-72-1, Trovafloxacin 159989-65-8, Nelfinavir mesylate
 283158-20-3 329326-68-3, p-Isononylphenoxypolyglycidol 503178-50-5
 608094-65-1, PEG-vitamin A 630400-66-7 630400-67-8 634601-99-3
 RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (liquid dosage comps. of **stable** nanoparticulate drugs)

L2 ANSWER 19 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2004:41242 CAPLUS

DOCUMENT NUMBER: 140:82283

TITLE: Long-term **stable** oral pharmaceutical
 formulation of microgranules in suspension

INVENTOR(S): Artalejo Ortega, Beatriz; Batllori Calbo, Javier;
 Fernandez Garcia, Andres; Julve Rubio, Jordi

PATENT ASSIGNEE(S): Laboratorios S.A.L.V.A.T., S.A., Spain

SOURCE: PCT Int. Appl., 18 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2004004682	A2	20040115	WO 2003-EP6927	20030630
WO 2004004682	A3	20041028		

W: AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN,
 CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH,
 GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR,
 LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NI, NO, NZ, OM,
 PG, PH, PL, PT, RO, RU, SC, SD, SE, SG, SK, SL, SY, TJ, TM, TN,
 TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW
 RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AM, AZ, BY,
 KG, KZ, MD, RU, TJ, TM, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES,
 FI, FR, GB, GR, HU, IE, IT, LU, MC, NL, PT, RO, SE, SI, SK, TR,
 BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG

PRIORITY APPLN. INFO.: ES 2002-1610 A 20020702

AE Disclosed are pharmaceutical formulations obtained by subjecting
 conventional microgranules to an external seal-coating layer that avoids
 the penetration of liquid vehicle, and selecting a hydrophobic liquid vehicle
 with a viscosity high enough not to wet the microgranules. The
 seal-coating layer may be obtained by coating the microgranules with an
 aqueous suspension comprising film formers and plasticizers. The liquid
 vehicle

is comprised of oily solvents and viscosity agents. The formulation is
 presented in single dose sachets ready-to-use. This formulation enables
 the liquid oral administration of antiulcerous microgranules of
 benzimidazoles, preferably **lansoprazole**, with several advantages
 comparing to com. available suspensions. The new formulation of
lansoprazole microgranules has a similar bioavailability and
 slightly higher stability than conventional hard gelatin capsules. For
 example, conventional microgranules of **lansoprazole** were
 subjected to an addnl. seal coating with a composition containing

hydroxypropyl Me

cellulose 10, polyethylene glycol 5, and purified water q.s. to 100 %.
 The coated granules were suspended in an oily vehicle containing lauroyl
 macrogol-32 glyceride 4, ammonium glycyrrhizinate 0.5, Na saccharin 0.1,
 Na cyclamate 2, flavoring 1, and medium-chain glycerides balance to 100 %.
 The oily suspension obtained were packaged in single-dose sachets.

TI Long-term **stable** oral pharmaceutical formulation of
 microgranules in suspension

- AB Disclosed are pharmaceutical formulations obtained by subjecting conventional microgranules to an external seal-coating layer that avoids the penetration of liquid vehicle, and selecting a hydrophobic liquid vehicle with a viscosity high enough not to wet the microgranules. The seal-coating layer may be obtained by coating the microgranules with an aqueous suspension comprising film formers and plasticizers. The liquid vehicle is comprised of oily solvents and viscosity agents. The formulation is presented in single dose sachets ready-to-use. This formulation enables the liquid oral administration of antiulcerous microgranules of benzimidazoles, preferably **lansoprazole**, with several advantages comparing to com. available suspensions. The new formulation of lansoprazole microgranules has a similar bioavailability and slightly higher stability than conventional hard gelatin capsules. For example, conventional microgranules of **lansoprazole** were subjected to an addnl. seal coating with a composition containing hydroxypropyl Me cellulose 10, polyethylene glycol 5, and purified water q.s. to 100 %. The coated granules were suspended in an oily vehicle containing lauroyl macrogol-32 glyceride 4, ammonium glycyrrhizinate 0.5, Na saccharin 0.1, Na cyclamate 2, flavoring 1, and medium-chain glycerides balance to 100 %. The oily suspension obtained were packaged in single-dose sachets.
- ST antiulcer granule oral suspension bioavailability; **lansoprazole** granule cellulose ether coating suspension
- IT Glycerides, biological studies
 RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (medium-chain; seal-coated microgranules in liquid vehicles for manufacturing **stable** oral suspensions)
- IT Antiulcer agents
 Drug bioavailability
 (seal-coated microgranules in liquid vehicles for manufacturing **stable** oral suspensions)
- IT Corn oil
 Lecithins
 Peanut oil
 Polyoxyalkylenes, biological studies
 Soybean oil
 RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (seal-coated microgranules in liquid vehicles for manufacturing **stable** oral suspensions)
- IT Glycerides, biological studies
 RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (short-chain; seal-coated microgranules in liquid vehicles for manufacturing **stable** oral suspensions)
- IT Drug delivery systems
 (suspensions, oral; seal-coated microgranules in liquid vehicles for manufacturing **stable** oral suspensions)
- IT 7631-86-9, Silica, biological studies
 RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (colloidal; seal-coated microgranules in liquid vehicles for manufacturing **stable** oral suspensions)
- IT 77-93-0, Triethyl citrate 88-99-3D, Phthalic acid, esters 109-43-3, Dibutyl decanedioate 112-92-5, Stearyl alcohol 9003-39-8, PVP 9004-65-3, Hydroxypropyl methyl cellulose 9005-32-7, Alginic acid 11138-66-2, Xanthan gum 24938-16-7, Eudragit EPO 25322-68-3, Polyethylene glycol 26942-95-0, Triisostearin 31566-31-1, Glyceryl monostearate 36653-82-4, Cetyl alcohol 103577-45-3,
Lansoprazole
 RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (seal-coated microgranules in liquid vehicles for manufacturing **stable** oral suspensions)

L2 ANSWER 20 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2003:605606 CAPLUS

DOCUMENT NUMBER: 140:263770

TITLE: Assessment of potential digoxin-rabeprazole interaction after formulary conversion of proton-pump inhibitors

AUTHOR(S): Le, Grace H.; Schaefer, Monica G.; Plowman, Brian K.; Morreale, Anthony P.; Delattre, Melissa; Okino, Lisa; Felicio, Leda

CORPORATE SOURCE: Veterans Affairs San Diego Healthcare System (VASDHS), San Diego, CA, USA

SOURCE: American Journal of Health-System Pharmacy (2003), 60(13), 1343-1345

CODEN: AHSPEK; ISSN: 1079-2082

PUBLISHER: American Society of Health-System Pharmacists

DOCUMENT TYPE: Journal

LANGUAGE: English

AB A nonblinded, nonrandomized, prospective, observational drug utilization evaluation was carried out to assess the digoxin levels before and after the conversion to rabeprazole to ensure the it would not neg. affect digoxin levels and treatment outcomes. The mean \pm standard deviation serum digoxin concentration did not change significantly in patients whose

proton-pump inhibitor therapy was changed from **lansoprazole** or omeprazole to rabeprazole. The greater than 15% increase in digoxin levels that occurred in 12 patients could have been clin. significant had they had serum digoxin levels at or near the upper limit of the therapeutic range when rabeprazole was added. This suggests that it is necessary to establish a baseline digoxin level and monitor for adverse effects during a conversion of **stable** digoxin recipients from one proton-pump inhibitor to another.

REFERENCE COUNT: 8 THERE ARE 8 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

AB A nonblinded, nonrandomized, prospective, observational drug utilization evaluation was carried out to assess the digoxin levels before and after the conversion to rabeprazole to ensure the it would not neg. affect digoxin levels and treatment outcomes. The mean \pm standard deviation serum digoxin concentration did not change significantly in patients whose

proton-pump inhibitor therapy was changed from **lansoprazole** or omeprazole to rabeprazole. The greater than 15% increase in digoxin levels that occurred in 12 patients could have been clin. significant had they had serum digoxin levels at or near the upper limit of the therapeutic range when rabeprazole was added. This suggests that it is necessary to establish a baseline digoxin level and monitor for adverse effects during a conversion of **stable** digoxin recipients from one proton-pump inhibitor to another.

IT Human

(assessment of potential digoxin-rabeprazole interaction after formulary conversion of proton-pump inhibitors from **lansoprazole** or omeprazole to rabeprazole)

IT Drug interactions

(pharmacokinetic; assessment of potential digoxin-rabeprazole interaction after formulary conversion of proton-pump inhibitors from **lansoprazole** or omeprazole to rabeprazole)

IT Transport proteins

RL: BSU (Biological study, unclassified); BIOL (Biological study) (proton pump; assessment of potential digoxin-rabeprazole interaction after formulary conversion of proton-pump inhibitors from **lansoprazole** or omeprazole to rabeprazole)

IT 117976-89-3, Rabeprazole

RL: ADV (Adverse effect, including toxicity); PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(assessment of potential digoxin-rabeprazole interaction after
formulary conversion of proton-pump inhibitors from
lansoprazole or omeprazole to rabeprazole)

IT 20830-75-5, Digoxin

RL: ADV (Adverse effect, including toxicity); PKT (Pharmacokinetics); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(assessment of potential digoxin-rabeprazole interaction after
formulary conversion of proton-pump inhibitors from
lansoprazole or omeprazole to rabeprazole)

IT 73590-58-6, Omeprazole 103577-45-3, **Lansoprazole**

RL: PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(assessment of potential digoxin-rabeprazole interaction after
formulary conversion of proton-pump inhibitors from
lansoprazole or omeprazole to rabeprazole)

L2 ANSWER 21 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2003:242161 CAPLUS

DOCUMENT NUMBER: 138:260473

TITLE: Pharmaceutical formulations for protecting
pharmaceutical compound from acidic environments

INVENTOR(S): Taneja, Rajneesh; Gupta, Pramrod

PATENT ASSIGNEE(S): Abbott Laboratories, USA

SOURCE: PCT Int. Appl., 33 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2003024449	A1	20030327	WO 2002-US22229	20020712
W: CA, JP, MX				
RW: AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, SK, TR				
US 2003235628	A1	20031225	US 2001-955801	20010919
CA 2460987	AA	20030327	CA 2002-2460987	20020712
EP 1429766	A1	20040623	EP 2002-750005	20020712
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, FI, CY, TR, BG, CZ, EE, SK				
JP 2005507883	T2	20050324	JP 2003-528545	20020712
PRIORITY APPLN. INFO.:			US 2001-955801	A 20010919
			WO 2002-US22229	W 20020712

AB Pharmaceutical comps. for protecting acid-labile drugs, such as a proton pump inhibitor, in acidic environment comprise a protectant, i.e., a water-soluble or water-insol. acid neutralizer. For example, granules were prepared containing **lansoprazole** 30 mg, magnesium hydroxide 350 mg, calcium carbonate 140 mg, sucrose 120 mg, and tromethamine 350 mg. **Lansoprazole** was **stable** in the granules kept in a closed container at room temperature for 27 days.

REFERENCE COUNT: 6 THERE ARE 6 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

AB Pharmaceutical comps. for protecting acid-labile drugs, such as a proton pump inhibitor, in acidic environment comprise a protectant, i.e., a water-soluble or water-insol. acid neutralizer. For example, granules were prepared containing **lansoprazole** 30 mg, magnesium hydroxide 350 mg, calcium carbonate 140 mg, sucrose 120 mg, and tromethamine 350 mg. **Lansoprazole** was **stable** in the granules kept in a closed container at room temperature for 27 days.

10/773,535

IT 103577-45-3, **Lansoprazole**

RL: PRP (Properties); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(acid neutralizers for protecting acid-labile drugs in acidic environment)

L2 ANSWER 22 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2003:173403 CAPLUS

DOCUMENT NUMBER: 138:210335

TITLE: **Stable** pharmaceutical compositions comprising acid labile benzimidazoles

INVENTOR(S): Sugaya, Masae; Shimizu, Toshihiro

PATENT ASSIGNEE(S): Takeda Chemical Industries, Ltd., Japan

SOURCE: PCT Int. Appl., 58 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2003017980	A1	20030306	WO 2002-JP8704	20020829
W:				
AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, OM, PH, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VC, VN, YU, ZA, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM				
RW:				
GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AT, BE, BG, CH, CY, CZ, DE, DK, EE, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, SK, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG				
CA 2448760	AA	20030306	CA 2002-2448760	20020829
JP 2003327533	A2	20031119	JP 2002-251254	20020829
EP 1420763	A1	20040526	EP 2002-765367	20020829
R:				
AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO, MK, CY, AL, TR, BG, CZ, EE, SK				
US 2004248939	A1	20041209	US 2004-487809	20040226
PRIORITY APPLN. INFO.:			JP 2001-263481	A 20010831
			JP 2001-341477	A 20011107
			JP 2002-60006	A 20020306
			WO 2002-JP8704	W 20020829

OTHER SOURCE(S): MARPAT 138:210335

AB A solid composition, without enteric coating, contains an acid-labile active ingredient, particularly, a benzimidazole having an antiulcer activity.

This composition neutralizes the acid in the stomach quickly, exerts quickly the pharmacol. effect of the drug and suppresses the formation of CO₂. A gastric disintegrable solid composition contains in addition to the drug at least

1 component selected from metal oxides and metal hydroxides. The composition has a disintegration time of ≤7 min. **Lansoprazole** 240 g, 1160 g Mg(OH)₂, 616 g D-mannitol, and 264 g corn starch were charged into a fluidized-bed granulator, and 8% aqueous solution prepared by dissolving 120

g of

hydroxypropyl cellulose in 1380 g water was sprayed, and these materials were granulated, and dried to obtain 2188 g of granules (active ingredient group). Mg(OH)₂ 870 g, 1107 g of D-mannitol and 474 g of corn starch were charged in a fluidized bed granulator, and 750 g water was sprayed, and these materials were granulated, and dried to obtain 2199 g of granules (outer layer group). The active ingredient group 300 g, 408.5 g the outer

layer group, 37.5 g Crospovidone and 11 g Mg stearate were mixed in a bag to obtain a mixture. The resultant mixture was compressed into tablets (750 mg/tablet). No darkishness by whittled powders or sticking of the mixture on the die was observed in the resulting tablets.

REFERENCE COUNT: 8 THERE ARE 8 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

TI **Stable** pharmaceutical compositions comprising acid labile benzimidazoles

AB A solid composition, without enteric coating, contains an acid-labile active ingredient, particularly, a benzimidazole having an antiulcer activity. This composition neutralizes the acid in the stomach quickly, exerts quickly the pharmacol. effect of the drug and suppresses the formation of CO₂. A gastric disintegrable solid composition contains in addition to the drug at least

1 component selected from metal oxides and metal hydroxides. The composition has a disintegration time of ≤7 min. **Lansoprazole** 240 g, 1160 g Mg(OH)₂, 616 g D-mannitol, and 264 g corn starch were charged into a fluidized-bed granulator, and 8% aqueous solution prepared by dissolving 120

g of hydroxypropyl cellulose in 1380 g water was sprayed, and these materials were granulated, and dried to obtain 2188 g of granules (active ingredient group). Mg(OH)₂ 870 g, 1107 g of D-mannitol and 474 g of corn starch were charged in a fluidized bed granulator, and 750 g water was sprayed, and these materials were granulated, and dried to obtain 2199 g of granules (outer layer group). The active ingredient group 300 g, 408.5 g the outer layer group, 37.5 g Crospovidone and 11 g Mg stearate were mixed in a bag to obtain a mixture. The resultant mixture was compressed into tablets (750 mg/tablet). No darkishness by whittled powders or sticking of the mixture on the die was observed in the resulting tablets.

IT Carbonates, biological studies

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses) (alkaline earth; **stable** pharmaceutical comps. comprising acid-labile benzimidazoles)

IT Drug delivery systems

(capsules; **stable** pharmaceutical comps. comprising acid-labile benzimidazoles)

IT Drug delivery systems

(granules; **stable** pharmaceutical comps. comprising acid-labile benzimidazoles)

IT Transport proteins

RL: BSU (Biological study, unclassified); BIOL (Biological study) (proton pump, inhibitors; **stable** pharmaceutical comps. comprising acid-labile benzimidazoles)

IT Calcination

Surface area

(**stable** pharmaceutical comps. comprising acid-labile benzimidazoles)

IT Hydroxides (inorganic)

Oxides (inorganic), biological studies

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses) (**stable** pharmaceutical comps. comprising acid-labile benzimidazoles)

IT Drug delivery systems

(tablets; **stable** pharmaceutical comps. comprising acid-labile benzimidazoles)

IT 21645-51-2, Aluminum hydroxide (Al(OH)₃), biological studies

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses) (gels; **stable** pharmaceutical comps. comprising acid-labile benzimidazoles)

IT 1309-48-4, Magnesium oxide (MgO), biological studies

RL: FMU (Formation, unclassified); PRP (Properties); THU (Therapeutic use); BIOL (Biological study); FORM (Formation, nonpreparative); USES

(Uses)

(**stable** pharmaceutical compns. comprising acid-labile
benzimidazoles)

IT 74-79-3, L-Arginine, biological studies 77-86-1, Trometamol 150-90-3,
Disodium succinate 7558-79-4, DiSodium phosphate 7601-54-9, TriSodium
phosphate

RL: MOA (Modifier or additive use); THU (Therapeutic use); BIOL
(Biological study); USES (Uses)

(**stable** pharmaceutical compns. comprising acid-labile
benzimidazoles)

IT 144-55-8, Carbonic acid monosodium salt, biological studies 471-34-1,
Calcium carbonate, biological studies 546-93-0, Magnesium carbonate
1343-88-0, Magnesium silicate 12304-65-3, Hydrotalcite 12511-31-8
73590-58-6, Omeprazole 102625-70-7, Pantoprazole 103577-45-3,
Lansoprazole 117976-89-3, Rabeprazole

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(**stable** pharmaceutical compns. comprising acid-labile
benzimidazoles)

L2 ANSWER 23 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2002:958602 CAPLUS

DOCUMENT NUMBER: 138:29133

TITLE: Formulation of **stable** antiulcer oral
preparations

INVENTOR(S): Machiba, Yasuo; Ikemoto, Keiichi; Tatsumi, Asaki;
Asada, Kazuyoshi

PATENT ASSIGNEE(S): Towa Pharmaceutical Co., Ltd., Japan

SOURCE: Jpn. Kokai Tokkyo Koho, 4 pp.

CODEN: JKXXAF

DOCUMENT TYPE: Patent

LANGUAGE: Japanese

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
JP 2002363080	A2	20021218	JP 2001-173557	20010608
PRIORITY APPLN. INFO.:			JP 2001-173557	20010608

AB **Stable** antiulcer oral prepns., including enteric coated tablets,
containing omeprazole, **lansoprazole**, and rabeprazole, and their
alkali salts, are formulated by granulating and coating with film-forming
water-soluble polymers and tableting with dispersing agents, etc.

TI Formulation of **stable** antiulcer oral preparations

AB **Stable** antiulcer oral prepns., including enteric coated tablets,
containing omeprazole, **lansoprazole**, and rabeprazole, and their
alkali salts, are formulated by granulating and coating with film-forming
water-soluble polymers and tableting with dispersing agents, etc.

IT Antiulcer agents

Dispersing agents

Stability

(formulation of **stable** antiulcer oral prepns.)

IT Polymers, biological studies

Polyoxyalkylenes, biological studies

RL: PRP (Properties); THU (Therapeutic use); BIOL (Biological study); USES
(Uses)

(formulation of **stable** antiulcer oral prepns.)

IT Drug delivery systems

(oral; formulation of **stable** antiulcer oral prepns.)

IT Drug delivery systems

(tablets, enteric-coated; formulation of **stable** antiulcer
oral prepns.)

IT 9004-64-2, Hydroxypropylcellulose 25322-68-3, PEG 6000 73590-58-6,

10/773,535

Omeprazole 103577-45-3, **Lansoprazole** 117976-89-3,
Rabeprazole
RL: PRP (Properties); THU (Therapeutic use); BIOL (Biological study); USES
(Uses)
(formulation of **stable** antiulcer oral prepsns.)

L2 ANSWER 24 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER: 2002:636460 CAPLUS
DOCUMENT NUMBER: 137:159367
TITLE: Enteric coated preparations containing proton pump
inhibitors
INVENTOR(S): Hirata, Kenji; Mori, Masaki
PATENT ASSIGNEE(S): Kyowa Yakuin Kogyo K. K., Japan
SOURCE: Jpn. Kokai Tokkyo Koho, 5 pp.
CODEN: JKXXAF
DOCUMENT TYPE: Patent
LANGUAGE: Japanese
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
JP 2002234842	A2	20020823	JP 2001-77232	20010209
US 2004146558	A1	20040729	US 2003-352141	20030128

PRIORITY APPLN. INFO.: JP 2001-77232 A 20010209

AB This invention relates to **stable** enteric-soluble compns. which contain benzimidazole-type proton pump inhibitors. The compns. show little variation in drug release onset time. The compns. comprise (1) a core containing benzimidazoles as active ingredients and alkalies, (2) a water-insol. membrane coating containing dispersed water-soluble substance particles, and (3) an enteric-soluble coating. An enteric-coated tablet was formulated containing omeprazole 20, lactose 70, starch 21, low-substituted hydroxypropyl cellulose 6, hydroxypropyl cellulose 1, talc 2, and Mg stearate 1 mg.

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IT 57-50-1, White sugar, biological studies 63-42-3, Lactose 69-65-8, D-Mannitol 99-20-7, Trehalose 144-55-8, Sodium hydrogen carbonate, biological studies 497-19-8, Sodium carbonate, biological studies 7632-05-5, Sodium phosphate 9004-38-0, Cellulose acetate phthalate 9004-57-3, Ethyl cellulose 9005-25-8, Starch, biological studies 9050-31-1, Hydroxypropyl methyl cellulose phthalate 25086-15-1, Methacrylic acidmethyl methacrylate copolymer 37205-99-5, Carboxymethyl ethyl cellulose 53237-50-6 71138-97-1, Hydroxypropyl methyl cellulose acetate succinate 73590-58-6, Omeprazole 102625-70-7, Pantoprazole 103577-45-3, **Lansoprazole** 117976-89-3, Rabeprazole
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(enteric coated prepsns. containing proton pump inhibitors)

L2 ANSWER 25 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER: 2002:555334 CAPLUS
DOCUMENT NUMBER: 137:114525
TITLE: Syntactic deformable pharmaceutical foam compositions
INVENTOR(S): Odidi, Isa; Odidi, Amina
PATENT ASSIGNEE(S): Can.

10/773,535

SOURCE: PCT Int. Appl., 47 pp.
CODEN: PIXXD2
DOCUMENT TYPE: Patent
LANGUAGE: English
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2002056861	A2	20020725	WO 2002-CA54	20020117
WO 2002056861	A3	20021017		
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, OM, PH, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TN, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZM, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM			
RW:	GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZM, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG			
US 6800668	B1	20041005	US 2001-765783	20010119
CA 2435276	AA	20020725	CA 2002-2435276	20020117
CA 2435276	C	20050315		

PRIORITY APPLN. INFO.: US 2001-765783 A 20010119
WO 2002-CA54 W 20020117

AB The invention relates to methods for preparing a syntactic foam composition suitable for use as a carrier for chems. or other compds., including pharmaceuticals. Carbopol 971P, hydroxyethyl cellulose, cellulose microspheres and silica, was mixed in a high-shear mixer. The resulting admixt. was treated with 2-propanol, while simultaneously subjecting the admixt. to high-shear forces in the high-shear mixer. This mixing created a uniform **stable** syntactic deformable and compressible dendritic solid foam which could be shaped before drying. Metoprolol succinate was added to the above admixt. and subjected to high-shear agitation for 2 min before treatment with 2-propanol. A **stable** syntactic deformable and compressible dendritic solid foam which could be shaped before drying was obtained. This was dried at 40°. The dried foam was the disentangled by size reduction to obtain discrete particles. The free flowing particles were reassembled and shaped by compression in a mold. The shaped units, when subjected to an aqueous medium, released metoprolol over a period of ≤3 h.

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IT 50-02-2, Dexamethasone 50-28-2, Estradiol, biological studies 50-48-6, Amitriptyline 50-70-4, Sorbitol, biological studies 50-78-2, Aspirin 50-99-7, Glucose, biological studies 51-48-9, Levothyroxine, biological studies 53-03-2, Prednisone 54-31-9, Furosemide 57-27-2, Morphine,

biological studies 57-41-0, Phenytoin 57-50-1, Sucrose, biological studies 57-63-6, EthinylEstradiol 58-93-5, Hydrochlorothiazide 59-92-7, Levodopa, biological studies 60-87-7, Promethazine 63-42-3, Lactose 67-20-9, Nitrofurantoin 68-22-4, Norethindrone 69-65-8, Mannitol 76-42-6, Oxycodone 76-57-3, Codeine 78-44-4, Carisoprodol 81-81-2, Warfarin 83-43-2, Methylprednisolone 87-99-0, Xylitol 89-57-6, Mesalamine 90-82-4, Pseudoephedrine 93-14-1, Guaifenesin 99-66-1, Pentanoic acid, 2-propyl 103-90-2, Acetaminophen 114-07-8, Erythromycin 125-29-1, Hydrocodone 127-07-1, Hydroxyurea 132-98-9, Penicillin VK 155-09-9, Tranlylcypromine 300-62-9D, Amphetamine, salts 303-53-7, Cyclobenzaprine 315-30-0, Allopurinol 378-44-9, Betamethasone 396-01-0, Triamterene 439-14-5, Diazepam 469-62-5, Propoxyphene 525-66-6, Propranolol 673-06-3, D-Phenylalanine 797-63-7, Levonorgestrel 846-49-1, Lorazepam 846-50-4, Temazepam 1119-34-2, L-Arginine hydrochloride 1622-61-3, Clonazepam 3056-17-5, Stavudine 3930-20-9, Sotalol 4205-90-7, Clonidine 4419-39-0, Beclomethasone 7447-40-7, Potassium Chloride, biological studies 7460-12-0, Pseudoephedrine sulfate 7481-89-2, Zalcitabine 7631-86-9, Silica, biological studies 9002-89-5, Polyvinyl alcohol 9002-96-4, α -Tocopherol polyethylene glycol succinate 9003-39-8, Povidone 9004-34-6, Cellulose, biological studies 9004-54-0, Dextran, biological studies 9004-62-0, Hydroxyethyl Cellulose 9004-65-3, Hydroxypropyl Methyl cellulose 9005-25-8, Starch, biological studies 9007-12-9, Calcitonin 10238-21-8, Glyburide 10540-29-1, Tamoxifen 11138-66-2, Xanthan gum 12650-69-0, Mupirocin 15686-71-2, Cephalexin 15687-27-1, Ibuprofen 16051-77-7, Isosorbide Mononitrate 18559-94-9, Albuterol 18641-57-1, Glyceryl behenate 19794-93-5, Trazodone 20830-75-5, Digoxin 21256-18-8, Oxaprozin 22204-53-1, Naproxen 23593-75-1, Clotrimazole 24980-41-4, Poly(ϵ -caprolactone) 25086-15-1, Eudragit L100 25248-42-4, Poly[oxy(1-oxo-1,6-hexanediyl)] 25322-68-3, Polyethylene glycol 25812-30-0, Gemfibrozil 26009-03-0, Poly(glycolic acid) 26023-30-3, Poly[oxy(1-methyl-2-oxo-1,2-ethanediyl)] 26100-51-6, Poly(lactic acid) 26124-68-5, Poly(glycolic acid) 26787-78-0, Amoxicillin 28860-95-9, Carbidopa 28981-97-7, Alprazolam 29122-68-7, Atenolol 30516-87-1, Zidovudine 32986-56-4, Tobramycin 34346-01-5, Glycolic acid-lactic acid copolymer 51384-51-1, Metoprolol 54739-18-3, Fluvoxamine 54910-89-3, Fluoxetine 55268-75-2, Cefuroxime 56180-94-0, Acarbose 58001-44-8 59122-46-2, Misoprostol 59729-33-8, Citalopram 59803-98-4, Brimonidine 60205-81-4, Ipratropium 61869-08-7, Paroxetine 63590-64-7, Terazosin 63675-72-9, Nisoldipine 66357-35-5, Ranitidine 66376-36-1, Alendronate 66722-44-9, Bisoprolol 69655-05-6, Didanosine 72432-03-2, Miglitol 72509-76-3, Felodipine 72956-09-3, Carvedilol 74191-85-8, Doxazosin 75330-75-5, Lovastatin 75847-73-3, Enalapril 76547-98-3, Lisinopril 76584-70-8, Divalproex sodium 76824-35-6, Famotidine 76963-41-2, Nizatidine 78644-42-5, Poly(malic acid) 78666-19-0, Poly(malic acid), SRU 79617-96-2, Sertraline 79794-75-5, Loratadine 79902-63-9, Simvastatin 80474-14-2, Fluticasone Propionate 81093-37-0, Pravastatin 81098-60-4, Cisapride 81103-11-9, Clarithromycin 82419-36-1, Ofloxacin 82626-48-0, Zolpidem 83799-24-0, Fexofenadine 83881-51-0, Cetirizine 83905-01-5, Azithromycin 84449-90-1, Raloxifene 85441-61-8, Quinapril 85721-33-1, Ciprofloxacin 86541-75-5, Benazepril 87333-19-5, Ramipril 88150-42-9, Amlodipine 89365-50-4, Salmeterol 91161-71-6, Terbinafine 92665-29-7, Cefprozil 93413-69-5, Venlafaxine 93479-97-1, Glimepiride 93957-54-1, Fluvastatin 97322-87-7, Troglitazone 98048-97-6, Fosinopril 98418-47-4, Metoprolol succinate 99614-02-5, Ondansetron 100986-85-4, Levofloxacin 103577-45-3, **Lansoprazole** 103628-46-2, Sumatriptan 104632-26-0, Pramipexole 105102-22-5, Mometasone 106133-20-4, Tamsulosin 106266-06-2, Risperidone 107753-78-6, Zafirlukast 109889-09-0, Granisetron 111974-69-7, Quetiapine 113665-84-2, Clopidogrel 114798-26-4, Losartan 120014-06-4, Donepezil 124937-51-5, Tolterodine 127779-20-8,

Saquinavir 129618-40-2, Nevirapine 130209-82-4, Latanoprost
 132539-06-1, Olanzapine 134523-00-5, Atorvastatin 134678-17-4,
 Lamivudine 135062-02-1, Repaglinide 136470-78-5, Abacavir
 136817-59-9, Delavirdine 137862-53-4, Valsartan 138402-11-6,
 Irbesartan 139755-83-2, Sildenafil 150378-17-9, Indinavir
 151687-96-6, Carbopol 974P 154598-52-4, Efavirenz 155213-67-5,
 Ritonavir 158966-92-8, Montelukast 159989-64-7, Nelfinavir
 161279-68-1, Carbopol 971P 161814-49-9, Amprenavir 162011-90-7,
 Rofecoxib 169590-42-5, Celecoxib 192725-17-0, Lopinavir
 RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (syntactic deformable pharmaceutical foam compns.)

L2 ANSWER 26 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2002:521408 CAPLUS

DOCUMENT NUMBER: 137:83661

TITLE: Pharmaceutical compositions containing a non-enteric
 coated proton pump inhibitor and a carbonate salt and
 bicarbonate salt combination

INVENTOR(S): Taneja, Rajneesh; Gupta, Pramod

PATENT ASSIGNEE(S): Tap Pharmaceutical Products, Inc., USA

SOURCE: PCT Int. Appl., 22 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2002053097	A2	20020711	WO 2001-US48320	20011212
WO 2002053097	A3	20030130		
W: CA, JP, MX				
RW: AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, TR				
CA 2432184	AA	20020711	CA 2001-2432184	20011212
EP 1353624	A2	20031022	EP 2001-991084	20011212
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, FI, CY, TR				
JP 2004525100	T2	20040819	JP 2002-554048	20011212
PRIORITY APPLN. INFO.:			US 2000-750430	A 20001228
			WO 2001-US48320	W 20011212

AB A method for treating gastric acid disorders with a non-enteric coated proton pump inhibitor in a carrier including a bicarbonate salt of a Group IA metal and a carbonate salt of a Group IA metal; and a pharmaceutical composition of a non-enteric coated proton pump inhibitor in a carrier including a bicarbonate salt of a Group IA metal and a carbonate salt of a Group IA metal are disclosed. A preferred proton pump inhibitor is lansoprazole, a preferred bicarbonate salt is sodium bicarbonate, and a preferred carbonate salt is sodium carbonate. The composition is a fast-acting formulation which reduces the undesirable belching associated with proton pump inhibitor formulations that contain high doses of sodium bicarbonate. Granular formulations of **lansoprazole** for this example were prepared as follows. Sucrose (60 g) was dissolved in water with gentle heating to form a 60% solution. Then, 46.93 g Na₂CO₃ and 37.17 g NaHCO₃ were mixed together thoroughly. Subsequently, 35 g this mixture (carbicarb), 7.5 g lactose and 1.5 g **lansoprazole** were transferred to a mortar and mixed vigorously. The 60% sucrose solution (6 mL) was gradually added to the mortar while mixing with a pestle to form a coherent, wetted mass. This coherent mass was passed through a 10-mesh screen and the resulting granules were dried at 50° for 12 h. **Lansoprazole**, when formulated with carbicarb as granules, was **stable** in simulated gastric fluid for at least 60 min.

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2002032427	A1	20020425	WO 2000-BE126	20001020
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM			
RW:	GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG			
AU 2001011213	A5	20020429	AU 2001-11213	20001020
CA 2426175	AA	20020425	CA 2001-2426175	20011018
WO 2002032425	A2	20020425	WO 2001-BE184	20011018
WO 2002032425	A3	20030116		
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT			

RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US,
 UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM
 RW: GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY,
 DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, TR, BF,
 BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG
 AU 2002010284 A5 20020429 AU 2002-10284 20011018
 EP 1326609 A2 20030716 EP 2001-978022 20011018
 R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT,
 IE, SI, LT, LV, FI, RO, MK, CY, AL, TR
 US 2004043069 A1 20040304 US 2003-399482 20030418
 PRIORITY APPLN. INFO.: WO 2000-BE126 A 20001020
 WO 2001-BE184 W 20011018

AB An enteric formulation contains at least one benzimidazole derivative, said formulation comprising: a core containing at least one benzimidazole derivative and at least one lipophilic antioxidant, and an enteric envelope protecting the core at least at a pH of 3 to 5, preferably at a pH of 1 to 5. A core composition contained omeprazole, vitamin E PEG succinate, microcryst. cellulose, Crospovidone, lactose, mannitol, and Mg stearate and the coating composition contained povidone or HPMC.

REFERENCE COUNT: 4 THERE ARE 4 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

TI Stable oral formulation containing benzimidazole derivative
 ST benzimidazole oral formulation **stable**; omeprazole oral formulation **stable**
 IT Granulation
 (fluidized-bed; **stable** oral formulation containing benzimidazole derivative)
 IT Drug delivery systems
 (granules; **stable** oral formulation containing benzimidazole derivative)
 IT Drug delivery systems
 (oral; **stable** oral formulation containing benzimidazole derivative)
 IT Antioxidants
 (**stable** oral formulation containing benzimidazole derivative)
 IT Disaccharides
 Monosaccharides
 RL: MOA (Modifier or additive use); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (**stable** oral formulation containing benzimidazole derivative)
 IT Drug delivery systems
 (tablets, enteric-coated; **stable** oral formulation containing benzimidazole derivative)
 IT Drug delivery systems
 (tablets; **stable** oral formulation containing benzimidazole derivative)
 IT 12408-02-5, Hydrogen ion, biological studies
 RL: BSU (Biological study, unclassified); BIOL (Biological study)
 (pump, inhibitors; **stable** oral formulation containing benzimidazole derivative)
 IT 59-02-9, α -Tocopherol 63-42-3, Lactose 69-65-8, D-Mannitol
 9002-96-4 9003-39-8, Povidone 9004-34-6, Cellulose, biological studies
 9004-65-3, HPMC 9050-31-1, HP50
 RL: MOA (Modifier or additive use); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (**stable** oral formulation containing benzimidazole derivative)
 IT 25212-88-8, Eudragit L30D
 RL: PEP (Physical, engineering or chemical process); PYP (Physical process); THU (Therapeutic use); BIOL (Biological study); PROC (Process); USES (Uses)
 (**stable** oral formulation containing benzimidazole derivative)
 IT 73590-58-6, Omeprazole 102625-70-7, Pantoprazole 103577-45-3, Lansoprazole

10/773,535

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(stable oral formulation containing benzimidazole derivative)

L2 ANSWER 28 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2002:293642 CAPLUS

DOCUMENT NUMBER: 136:325542

TITLE: Preparation of 2-[3-methyl-3-(2,2,2-trifluoroethoxy)-2-pyridylmethylsulfinyl]benzimidazole compounds as
lansoprazole prodrugs and antiulcer agents

INVENTOR(S): Kamiyama, Keiji; Sato, Fumihiko

PATENT ASSIGNEE(S): Takeda Chemical Industries, Ltd., Japan

SOURCE: PCT Int. Appl., 69 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: Japanese

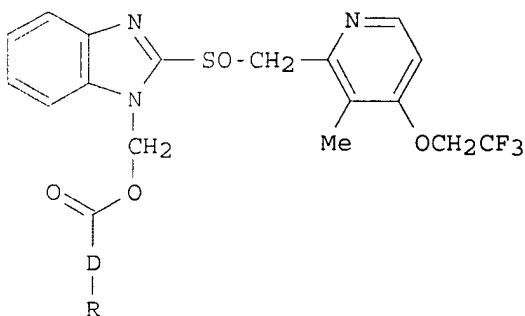
FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2002030920	A1	20020418	WO 2001-JP8943	20011011
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PH, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM			
RW:	GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG			
AU 2001094228	A5	20020422	AU 2001-94228	20011011
JP 2002187890	A2	20020705	JP 2001-314204	20011011
CA 2425363	AA	20030410	CA 2001-2425363	20011011
EP 1334971	A1	20030813	EP 2001-974795	20011011
R:	AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO, MK, CY, AL, TR			
US 2004039027	A1	20040226	US 2003-398820	20030409
PRIORITY APPLN. INFO.:			JP 2000-316864	A 20001012
			WO 2001-JP8943	W 20011011

OTHER SOURCE(S): MARPAT 136:325542

GI



I

AB Compds. represented by the following general formula (I; D = O, a single bond; R = (un)substituted hydrocarbonyl) or salts thereof are prepared. These compds. show: (1) excellent antiulcer, gastric acid secretion inhibitory, mucosa-protecting and anti-Helicobacter pylori effects in vivo; (2) a low toxicity; (3) a high stability to acid (i.e., making it unnecessary to

process into enteric prepn., thereby saving the cost and facilitating the intake by patients with dysphagia because of the small size); (4) a higher absorption speed than enteric prepn. (i.e., achieving higher expression of the gastric acid secretion inhibitory effect); and (5) a long-lasting effect. They are highly **stable** to acid and can be converted into proton pump inhibitors (e.g. **lansoprazole**) in vivo to thereby exert an antiulcer effect. Thus, to a solution of 1.99 g [2-[3-methyl-3-(2,2,2-trifluoroethoxy)-2-pyridylmethylsulfinyl]benzimidazol-1-yl]methanol in 25 mL THF were added 1.4 mL Et₃N and 0.924 mL trimethylacetyl chloride under ice-cooling and stirred for 2.5 h under ice-cooling to give [2-[3-methyl-3-(2,2,2-trifluoroethoxy)-2-pyridylmethylsulfinyl]benzimidazol-1-yl]methyl trimethylacetate (II). The half-life of II in artificial gastric juice was 13.8 h vs. <0.03 h for **lansoprazole**. Human liver and human small intestine S9 converted II into **lansoprazole** 88.6 and 100.0%, resp.

REFERENCE COUNT: 39 THERE ARE 39 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

- TI Preparation of 2-[3-methyl-3-(2,2,2-trifluoroethoxy)-2-pyridylmethylsulfinyl]benzimidazole compounds as **lansoprazole** prodrugs and antiulcer agents
- AB Comps. represented by the following general formula (I; D = O, a single bond; R = (un)substituted hydrocarbonyl) or salts thereof are prepared. These compts. show: (1) excellent antiulcer, gastric acid secretion inhibitory, mucosa-protecting and anti-Helicobacter pylori effects in vivo; (2) a low toxicity; (3) a high stability to acid (i.e., making it unnecessary to process into enteric prepn., thereby saving the cost and facilitating the intake by patients with dysphagia because of the small size); (4) a higher absorption speed than enteric prepn. (i.e., achieving higher expression of the gastric acid secretion inhibitory effect); and (5) a long-lasting effect. They are highly **stable** to acid and can be converted into proton pump inhibitors (e.g. **lansoprazole**) in vivo to thereby exert an antiulcer effect. Thus, to a solution of 1.99 g [2-[3-methyl-3-(2,2,2-trifluoroethoxy)-2-pyridylmethylsulfinyl]benzimidazol-1-yl]methanol in 25 mL THF were added 1.4 mL Et₃N and 0.924 mL trimethylacetyl chloride under ice-cooling and stirred for 2.5 h under ice-cooling to give [2-[3-methyl-3-(2,2,2-trifluoroethoxy)-2-pyridylmethylsulfinyl]benzimidazol-1-yl]methyl trimethylacetate (II). The half-life of II in artificial gastric juice was 13.8 h vs. <0.03 h for **lansoprazole**. Human liver and human small intestine S9 converted II into **lansoprazole** 88.6 and 100.0%, resp.
- ST methyltrifluoroethoxypyridylmethylsulfinylbenzimidazole prepn
lansoprazole prodrug antiulcer; Helicobacter pylori antibacterial
lansoprazole deriv prepn; proton pump inhibitor
lansoprazole prodrug
- IT Antibacterial agents
(against Helicobacter pylori; preparation of [methyl(fluoroethoxy)pyridylmethylsulfinyl]benzimidazole compts. as **lansoprazole** prodrugs and antiulcer agents)
- IT Esophagus, disease
Inflammation
(esophagitis, regurgitant; preparation of [methyl(fluoroethoxy)pyridylmethylsulfinyl]benzimidazole compts. as **lansoprazole** prodrugs and antiulcer agents)
- IT Inflammation
Stomach, disease
(gastritis; preparation of [methyl(fluoroethoxy)pyridylmethylsulfinyl]benzimidazole compts. as **lansoprazole** prodrugs and antiulcer agents)
- IT Lymphoma
(mucosa-associated lymphoid tissue; preparation of [methyl(fluoroethoxy)pyridylmethylsulfinyl]benzimidazole compts. as **lansoprazole** prodrugs and antiulcer agents)

- IT Dyspepsia
(non-ulcer; preparation of [methyl(fluoroethoxy)pyridylmethylsulfinyl]benzimidazole compds. as **lansoprazole** prodrugs and antiulcer agents)
- IT Antacids
Antiulcer agents
Helicobacter pylori
Human
Stomach, neoplasm
(preparation of [methyl(fluoroethoxy)pyridylmethylsulfinyl]benzimidazole compds. as **lansoprazole** prodrugs and antiulcer agents)
- IT Drug delivery systems
(prodrugs, for **lansoprazole**; preparation of [methyl(fluoroethoxy)pyridylmethylsulfinyl]benzimidazole compds. as **lansoprazole** prodrugs and antiulcer agents)
- IT Mucous membrane
(protecting agents; preparation of [methyl(fluoroethoxy)pyridylmethylsulfinyl]benzimidazole compds. as **lansoprazole** prodrugs and antiulcer agents)
- IT Gastric acid
RL: BSU (Biological study, unclassified); BIOL (Biological study)
(secretion, inhibitors; preparation of [methyl(fluoroethoxy)pyridylmethylsulfinyl]benzimidazole compds. as **lansoprazole** prodrugs and antiulcer agents)
- IT Digestive tract, disease
(upper gastrointestinal hemorrhage; preparation of [methyl(fluoroethoxy)pyridylmethylsulfinyl]benzimidazole compds. as **lansoprazole** prodrugs and antiulcer agents)
- IT 138530-94-6P, (R)-2-[[[3-Methyl-4-(2,2,2-trifluoroethoxy)-2-pyridyl]methyl]sulfinyl]-1H-benzimidazole
RL: IMF (Industrial manufacture); RCT (Reactant); SPN (Synthetic preparation); PREP (Preparation); RACT (Reactant or reagent)
(preparation of [methyl(fluoroethoxy)pyridylmethylsulfinyl]benzimidazole compds. as **lansoprazole** prodrugs and antiulcer agents)
- IT 412279-40-4P, Benzoic acid [2-[[[3-methyl-4-(2,2,2-trifluoroethoxy)-2-pyridyl]methyl]sulfinyl]-1H-benzimidazol-1-yl]methyl ester 412279-41-5P, Trimethylacetic acid [2-[[[3-methyl-4-(2,2,2-trifluoroethoxy)-2-pyridyl]methyl]sulfinyl]-1H-benzimidazol-1-yl]methyl ester 412279-42-6P, Acetic acid [2-[[[3-methyl-4-(2,2,2-trifluoroethoxy)-2-pyridyl]methyl]sulfinyl]-1H-benzimidazol-1-yl]methyl ester 412279-43-7P, Phenylacetic acid [2-[[[3-methyl-4-(2,2,2-trifluoroethoxy)-2-pyridyl]methyl]sulfinyl]-1H-benzimidazol-1-yl]methyl ester 412279-44-8P 412279-45-9P, 4-Methylbenzoic acid [2-[[[3-methyl-4-(2,2,2-trifluoroethoxy)-2-pyridyl]methyl]sulfinyl]-1H-benzimidazol-1-yl]methyl ester 412279-46-0P 412279-47-1P 412279-48-2P 412279-49-3P 412279-50-6P 412279-51-7P 412279-52-8P 412279-53-9P, 4-tert-Butylbenzoic acid [2-[[[3-methyl-4-(2,2,2-trifluoroethoxy)-2-pyridyl]methyl]sulfinyl]-1H-benzimidazol-1-yl]methyl ester 412279-54-0P 412279-55-1P, Isobutyric acid [2-[[[3-methyl-4-(2,2,2-trifluoroethoxy)-2-pyridyl]methyl]sulfinyl]-1H-benzimidazol-1-yl]methyl ester 412279-56-2P, (Acetylamino)acetic acid [2-[[[3-methyl-4-(2,2,2-trifluoroethoxy)-2-pyridyl]methyl]sulfinyl]-1H-benzimidazol-1-yl]methyl ester 412279-57-3P 412279-58-4P 412279-59-5P 412279-60-8P 412279-61-9P 412279-62-0P 412279-63-1P 412279-64-2P
RL: PAC (Pharmacological activity); SPN (Synthetic preparation); THU (Therapeutic use); BIOL (Biological study); PREP (Preparation); USES (Uses)
(preparation of [methyl(fluoroethoxy)pyridylmethylsulfinyl]benzimidazole compds. as **lansoprazole** prodrugs and antiulcer agents)
- IT 75-36-5, Acetyl chloride 79-03-8, Propanoyl chloride 79-30-1, Isobutyryl chloride 98-88-4, Benzoyl chloride 103-80-0, Phenylacetyl chloride 108-23-6, Isopropyl chloroformate 109-61-5, Propyl

chloroformate 501-53-1, Benzyl chloroformate 541-41-3, Ethyl chloroformate 543-24-8, N-Acetylglycine 592-34-7, Butyl chloroformate 628-12-6, 2-Methoxyethyl chloroformate 874-60-2, 4-Methylbenzoyl chloride 1710-98-1, 4-tert-Butylbenzoyl chloride 3282-30-2, Trimethylacetyl chloride 103577-40-8, 2-[[[3-Methyl-4-(2,2,2-trifluoroethoxy)-2-pyridyl]methyl]thio]-1H-benzimidazole 103577-45-3, 2-[[[3-Methyl-4-(2,2,2-trifluoroethoxy)-2-pyridyl]methyl]sulfinyl]-1H-benzimidazole

RL: RCT (Reactant); RACT (Reactant or reagent)

(preparation of [methyl(fluoroethoxy)pyridylmethylsulfinyl]benzimidazole compds. as **lansoprazole** prodrugs and antiulcer agents)

IT 412279-65-3P, [2-[[[3-Methyl-4-(2,2,2-trifluoroethoxy)-2-pyridyl]methyl]sulfinyl]-1H-benzimidazol-1-yl]methanol 412279-66-4P

RL: RCT (Reactant); SPN (Synthetic preparation); PREP (Preparation); RACT (Reactant or reagent)

(preparation of [methyl(fluoroethoxy)pyridylmethylsulfinyl]benzimidazole compds. as **lansoprazole** prodrugs and antiulcer agents)

IT 103577-45-3DP, **Lansoprazole**, derivs.

RL: PAC (Pharmacological activity); SPN (Synthetic preparation); THU (Therapeutic use); BIOL (Biological study); PREP (Preparation); USES (Uses)

(prodrugs for; preparation of [methyl(fluoroethoxy)pyridylmethylsulfinyl]benzimidazole compds. as **lansoprazole** prodrugs and antiulcer agents)

IT 9000-83-3

RL: BSU (Biological study, unclassified); BIOL (Biological study) (proton-translocating, inhibitors; preparation of [methyl(fluoroethoxy)pyridylmethylsulfinyl]benzimidazole compds. as **lansoprazole** prodrugs and antiulcer agents)

L2 ANSWER 29 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2002:256025 CAPLUS

DOCUMENT NUMBER: 136:284447

TITLE: Proton pump inhibitor formulation

INVENTOR(S): Cullen, Dan; Pelloni, Christopher L.

PATENT ASSIGNEE(S): Geneva Pharmaceuticals Inc., USA

SOURCE: PCT Int. Appl., 15 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
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WO 2002026210	A2	20020404	WO 2001-US42298	20010925
WO 2002026210	A3	20021219		
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CO, CR, CU, CZ, DE, DK, DM, DZ, EC, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PH, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM			
RW:	GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, TR, BF, BJ, CF, CG, CI, CM, GA, GN, GQ, GW, ML, MR, NE, SN, TD, TG			
AU 2001096908	A5	20020408	AU 2001-96908	20010925
US 2002064555	A1	20020530	US 2001-962785	20010925
US 2003211147	A1	20031113	US 2003-458776	20030609
PRIORITY APPLN. INFO.:			US 2000-236993P	P 20000929
			US 2001-962785	A1 20010925
			WO 2001-US42298	W 20010925

OTHER SOURCE(S): MARPAT 136:284447

AB Pharmaceutical capsule dosage forms of benzimidazole proton pump inhibitors are prepared by enclosing one or several enteric coated compressed cores in a capsule shell. The inventive formulations are **stable** and have higher bioavailability of the active ingredient relative to pellet and granule containing formulations. A core composition contained omeprazole 10.00, anhydrous lactose 36.95, microcryst. cellulose 9.0, Na lauryl sulfate 1.2, and croscarmellose sodium 2.25 mg, and the enteric coating contained Eudragit L30D55 4.104 and PEG 0.213 mg.

AB Pharmaceutical capsule dosage forms of benzimidazole proton pump inhibitors are prepared by enclosing one or several enteric coated compressed cores in a capsule shell. The inventive formulations are **stable** and have higher bioavailability of the active ingredient relative to pellet and granule containing formulations. A core composition contained omeprazole 10.00, anhydrous lactose 36.95, microcryst. cellulose 9.0, Na lauryl sulfate 1.2, and croscarmellose sodium 2.25 mg, and the enteric coating contained Eudragit L30D55 4.104 and PEG 0.213 mg.

IT 73590-58-6, Omeprazole 102625-70-7, Pantoprazole 103577-45-3, Lansoprazole 104340-86-5, Leminoprazole 117976-89-3, Rabeprazole 117976-90-6, Pariprazole
 RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (proton pump inhibitor formulation)

L2 ANSWER 30 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2002:185616 CAPLUS

DOCUMENT NUMBER: 136:252482

TITLE: Preparation of aqueous clear solution dosage forms with bile acids

INVENTOR(S): Yoo, Seo Hong

PATENT ASSIGNEE(S): USA

SOURCE: U.S. Pat. Appl. Publ., 35 pp., Cont.-in-part of U. S. 6,251,428.

CODEN: USXXCO

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 3

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
US 2002031558	A1	20020314	US 2001-778154	20010205
US 6251428	B1	20010626	US 1999-357549	19990720
US 2003186933	A1	20031002	US 2002-309603	20021204
PRIORITY APPLN. INFO.:			US 1998-94069P	P 19980724
			US 1999-357549	A2 19990720
			US 2000-180268P	P 20000204
			US 2001-778154	A3 20010205

AB Compns. for pharmaceutical and other uses comprise clear aqueous solns. of bile acids which do not form any detectable ppts. over selected ranges of pH values of the aqueous solution. The compns. comprise (i) water, (ii) a bile acid component in the form of a bile acid, bile acid salt, or a bile acid conjugated with an amine by an amide linkage; and (iii) either or both an aqueous soluble starch conversion product and an aqueous soluble non-starch polysaccharide. The composition remains in solution without forming a

precipitate over a range of pH values and, according to one embodiment, remains in solution for all pH values obtainable in an aqueous system. The composition may further contain

a pharmaceutical compound, such as insulin, heparin, bismuth compds., amantadine and rimantadine. For example, solution dosage forms that did not show any precipitation at any pH were prepared containing ursodeoxycholic acid (UDCA) 22

Ibuprofen 15826-37-6, Cromolyn sodium 18559-94-9, Albuterol 19237-84-4, Prazosin hydrochloride 19794-93-5, Trazodone 21829-25-4, Nifedipine 22204-53-1, Naproxen 22254-24-6, Ipratropium bromide 22494-42-4, Diflunisal 22916-47-8, Miconazole 23031-32-5, Terbutaline sulfate 23593-75-1, Clotrimazole 24169-02-6, Econazole nitrate 25717-80-0, Molsidomine 26787-78-0, Amoxicillin 28300-74-5, Antimony potassium tartrate 29094-61-9, Glipizide 30392-40-6, Bitolterol 30516-87-1, Zidovudine 31586-77-3, Bismuth sodium tartrate 32222-06-3, Calcitriol 34031-32-8, Auranofin 35711-34-3, Tolmetin sodium 36322-90-4, Piroxicam 36703-88-5, Isoprinostine 36791-04-5, Ribavirin 38260-01-4, Trientine hydrochloride 38304-91-5, Minoxidil 38677-81-5, Pirbuterol 39809-25-1, Penciclovir 42399-41-7, Diltiazem 50370-12-2, Cefadroxil 51110-01-1, Somatostatin 51333-22-3, Budesonide 51481-61-9, Cimetidine 53678-77-6, Muramyl dipeptide 53994-73-3, Cefaclor 54182-58-0, Sucralfate 56180-94-0, Acarbose 59122-46-2, Misoprostol 59277-89-3, Acyclovir 61318-91-0, Sulconazole nitrate 63074-08-8, Terazosin hydrochloride 63585-09-1, Foscarnet sodium 63675-72-9, Nisoldipine 64211-46-7, Oxiconazole nitrate 64706-54-3, Bepridil 65277-42-1, Ketoconazole 66357-35-5, Ranitidine 66357-59-3, Ranitidine hydrochloride 69655-05-6, Didanosine 73590-58-6, Omeprazole 75330-75-5, Lovastatin 75695-93-1, Isradipine 76824-35-6, Famotidine 76963-41-2, Nizatidine 77883-43-3, Doxazosin mesylate 78628-80-5, Terbinafine hydrochloride 79902-63-9, Simvastatin 80474-14-2, Fluticasone propionate 81103-11-9, Clarithromycin 81131-70-6, Pravastatin sodium 83150-76-9, Octreotide 83881-52-1, Cetirizine dihydrochloride 83905-01-5, Azithromycin 84625-61-6, Itraconazole 86386-73-4, Fluconazole 89365-50-4, Salmeterol 91980-85-7, 93957-55-2, Fluvastatin sodium 95233-18-4, Atovaquone 103577-45-3, Lansoprazole 104227-87-4, Famciclovir 107753-78-6, Zafirlukast 107910-75-8, Ganciclovir sodium 111406-87-2, Zileuton 113852-37-2, Cidofovir 124832-27-5, Valacyclovir hydrochloride 129618-40-2, Nevirapine 133107-64-9, Insulin lispro 134523-03-8, Atorvastatin-calcium 134678-17-4, Lamivudine 135062-02-1, Repaglinide 139755-83-2, Sildenafil 143201-11-0, Cerivastatin sodium 147221-93-0, Delavirdine mesylate 149845-06-7, Saquinavir mesylate 151767-02-1, Montelukast sodium 155213-67-5, Ritonavir 157810-81-6, Indinavir sulfate 159989-65-8, Nelfinavir mesylate 171599-83-0, Sildenafil citrate 403804-21-7

RL: PAC (Pharmacological activity); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(preparation of **stable** aqueous solns. containing bile acids for therapy)

IT 50-21-5, Lactic acid, reactions 56-87-1, L-Lysine, reactions 60-00-4, Edetic acid, reactions 62-49-7, Choline 70-26-8, L-Ornithine 74-79-3, L-Arginine, reactions 77-92-9, Citric acid, reactions 87-69-4, Tartaric acid, reactions 102-71-6, Triethanolamine, reactions 110-85-0, Piperazine, reactions 110-85-0D, Piperazine, N-alkyl derivs. 110-89-4, Piperidine, reactions 110-89-4D, Piperidine, N-alkyl derivs. 110-91-3, Morpholine, reactions 110-91-8D, Morpholine, N-alkyl derivs. 111-40-0, Diethylene triamine 112-57-2, Tetraethylene pentamine 123-75-1, Pyrrolidine, reactions 488-43-7, D-Glucamine 6915-15-7, Malic acid 7664-41-7, Ammonia, reactions 14002-32-5, Trimethanolamine

RL: RCT (Reactant); RACT (Reactant or reagent)

(preparation of **stable** aqueous solns. containing bile acids for therapy)

IT 50-99-7, D-Glucose, biological studies 9004-53-9, Dextrin 9004-54-0, Dextran, biological studies 9005-25-8, Starch, biological studies 9050-36-6, Maltodextrin

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(preparation of **stable** aqueous solns. containing bile acids for therapy)

10/773,535

TITLE: Storage-**stable** benzimidazole tablets and their manufacture
INVENTOR(S): Moroshima, Kenji; Kimura, Susumu; Shimogaki, Norio; Narasaki, Ryuichi; Funabashi, Hiroshi; Fujioka, Masaru; Ando, Hidenobu; Aoki, Shigeru; Iwamoto, Kiyoshi
PATENT ASSIGNEE(S): Eisai Co., Ltd., Japan
SOURCE: Jpn. Kokai Tokkyo Koho, 10 pp.
CODEN: JKXXAF
DOCUMENT TYPE: Patent
LANGUAGE: Japanese
FAMILY ACC. NUM. COUNT: 1
PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
JP 2001270827	A2	20011002	JP 2000-81276	20000323
PRIORITY APPLN. INFO.:			JP 2000-81276	20000323

OTHER SOURCE(S): MARPAT 135:278020

AB The tablets contain benzimidazoles Het1SOCH2Het2 [Het1 = (un)substituted benzimidazol-2-yl; Het2 = (un)substituted 2-pyridyl] or their physiol. acceptable salts, crospovidone (I), and lubricants except Mg stearate. Tablets containing rabeprazole Na 20.0, mannitol 83.8, I 40.0, NaOH 1.0, hydroxypropyl cellulose 3.0, and Na stearyl fumarate 2.2 mg showed disintegration time 6.5-7.4 and 6.2-7.4 before and after 2-day storage at 60°, resp.

TI Storage-**stable** benzimidazole tablets and their manufacture

IT Antiulcer agents

Lubricants

(storage-**stable** benzimidazole tablets containing crospovidone and lubricants)

IT Drug delivery systems

(tablets, enteric-coated; storage-**stable** benzimidazole tablets containing crospovidone and lubricants)

IT Drug delivery systems

(tablets; storage-**stable** benzimidazole tablets containing crospovidone and lubricants)

IT 57-11-4, Stearic acid, biological studies 1310-73-2, Sodium hydroxide, biological studies 1592-23-0, Calcium stearate 4070-80-8, Sodium stearyl fumarate 9003-39-8D, crosslinked 73590-58-6, Omeprazole 102625-70-7, Pantoprazole 103577-45-3, **Lansoprazole**

117976-89-3, Rabeprazole 117976-90-6, Rabeprazole sodium

RL: PRP (Properties); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(storage-**stable** benzimidazole tablets containing crospovidone and lubricants)

L2 ANSWER 32 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2001:635890 CAPLUS

DOCUMENT NUMBER: 135:185502

TITLE: Orally administrable acid-**stable** antiulcer benzimidazole polymeric derivatives

INVENTOR(S): Mali, Subhash; Gupte, Rajan; Deshpande, Jayant; Ranbhan, Kamlesh

PATENT ASSIGNEE(S): Kopran Research Laboratories Limited, India

SOURCE: PCT Int. Appl., 49 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2001062248	A1	20010830	WO 2000-IN16	20000224
W: AE, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CR, CU, CZ, DE, DK, DM, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM RW: GH, GM, KE, LS, MW, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG				
CA 2400953	AA	20010830	CA 2000-2400953	20000224
EP 1257269	A1	20021120	EP 2000-939036	20000224
EP 1257269	B1	20041103		
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO, MK, CY, AL				
JP 2003523386	T2	20030805	JP 2001-561314	20000224
BR 2000017140	A	20040525	BR 2000-17140	20000224
AT 281164	E	20041115	AT 2000-939036	20000224
US 2002038032	A1	20020328	US 2001-964442	20010928
US 2003023091	A9	20030130		
US 6617338	B2	20030909		
ZA 2002006649	A	20030820	ZA 2002-6649	20020820
PRIORITY APPLN. INFO.:			WO 2000-IN16	W 20000224
OTHER SOURCE(S):			MARPAT 135:185502	
AB	<p>Orally administrable acid stable anti-ulcer benzimidazole derivs. which are polymer based, are prepared The process of preparation comprises condensing a benzimidazole with a biocompatible partially orally biodegradable synthetic crosslinked polymer in aqueous medium at 5-80° and pH 4-11 under an inert atmospheric The percent weight of benzimidazole</p> <p>with respect to the polymeric conjugate is 1-50. The reaction mixture is cooled and the product is isolated and dried at 25-45°. There is also provided a formulation of the polymeric benzimidazoles in combination with excipients. Thus, a copolymer from acrylamide and glycidyl methacrylate was allowed to react with omeprazole to give a polymer-substituted drug. Tablet contained the above polymer-substituted omeprazole 100.0, lactose 70.0, Mg stearate 1.5, Me cellulose 0.6, and crospovidone 5.5 g, and water qs.</p>			
REFERENCE COUNT:	1	THERE ARE 1 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT		
TI	Orally administrable acid- stable antiulcer benzimidazole polymeric derivatives			
AB	<p>Orally administrable acid stable anti-ulcer benzimidazole derivs. which are polymer based, are prepared The process of preparation comprises condensing a benzimidazole with a biocompatible partially orally biodegradable synthetic crosslinked polymer in aqueous medium at 5-80° and pH 4-11 under an inert atmospheric The percent weight of benzimidazole</p> <p>with respect to the polymeric conjugate is 1-50. The reaction mixture is cooled and the product is isolated and dried at 25-45°. There is also provided a formulation of the polymeric benzimidazoles in combination with excipients. Thus, a copolymer from acrylamide and glycidyl methacrylate was allowed to react with omeprazole to give a polymer-substituted drug. Tablet contained the above polymer-substituted omeprazole 100.0, lactose 70.0, Mg stearate 1.5, Me cellulose 0.6, and crospovidone 5.5 g, and water qs.</p>			
IT	Drug delivery systems (capsules; orally administrable acid- stable antiulcer benzimidazole polymeric derivs.)			
IT	Antiulcer agents			

10/773,535

(orally administrable acid-**stable** antiulcer benzimidazole polymeric derivs.)

IT Drug delivery systems
(suspensions; orally administrable acid-**stable** antiulcer benzimidazole polymeric derivs.)

IT Drug delivery systems
(tablets; orally administrable acid-**stable** antiulcer benzimidazole polymeric derivs.)

IT 51-17-2DP, benzimidazole, derivs. 31743-77-8DP, Ethylene glycol dimethacrylate-glycidyl methacrylate copolymer, reaction products with imidazoles 55031-95-3DP, Acrylamide-glycidyl methacrylate copolymer, reaction products with imidazoles 73590-58-6DP, Omeprazole, reaction products with polymers 85075-35-0DP, Acrylonitrile-ethylene glycol dimethacrylate-glycidyl acrylate copolymer, reaction products with imidazoles 102625-70-7DP, Pantoprazole, reaction products with polymers 103577-45-3DP, **Lansoprazole**, reaction products with polymers

RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); SPN (Synthetic preparation); THU (Therapeutic use); BIOL (Biological study); PREP (Preparation); USES (Uses)

(orally administrable acid-**stable** antiulcer benzimidazole polymeric derivs.)

L2 ANSWER 33 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2001:450876 CAPLUS

DOCUMENT NUMBER: 135:51076

TITLE: New **stable** multi-unitary pharmaceutical

preparations containing substituted benzimidazoles
INVENTOR(S): Goncalves Mendes, Carla Patricia; Caeiro Ramalho De Oliveira, Maria Julia

PATENT ASSIGNEE(S): Laboratorio Medinfar-Produtos Farmaceuticos, S.A., Port.

SOURCE: Eur. Pat. Appl., 28 pp.

CODEN: EPXXDW

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
EP 1108425	A1	20010620	EP 1999-670010	19991216
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO				
US 6379705	B1	20020430	US 2000-580551	20000530
PRIORITY APPLN. INFO.:			EP 1999-670010	A 19991216

AE The present invention relates to new oral multi-unitary pharmaceutical prepsns. containing substituted benzimidazoles as inhibitors of H⁺,K⁺-ATPase (i.e., omeprazole, **lansoprazole**, pantoprazole, leminoprazole and pariprazole) or their pharmaceutically acceptable salts. Such pharmaceutical prepsns. are **stable** pellet prepsns. containing substituted benzimidazole(s) or their salts and they comprise a quantity of active ingredient of 1-50 mg, an inert core of spherical symmetry with a diameter of 600-1000 µm, constituted by inert excipients, coated with an active layer containing at least one substituted benzimidazole in the micronized form and various pharmaceutically acceptable inert excipients, mixed in suitable proportions in order to allow the disaggregation of the formulations and dissoln. of the active ingredient(s) in an appropriate manner, coated in turn with an insulating layer of a polymer soluble in water, free from alkaline and/or alkaline-earthly metallic salts, of a min. thickness of 15 µm, this layer being coated lastly with a gastro-resistant or enteric layer of a min. thickness of 30 µm. This invention also refers to the process for the preparation of said pharmaceutical

prepn.

REFERENCE COUNT: 9 THERE ARE 9 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

TI New **stable** multi-unitary pharmaceutical preparations containing substituted benzimidazoles

AB The present invention relates to new oral multi-unitary pharmaceutical prepn. containing substituted benzimidazoles as inhibitors of H⁺,K⁺-ATPase (i.e., omeprazole, **lansoprazole**, pantoprazole, leminoprazole and pariprazole) or their pharmaceutically acceptable salts. Such pharmaceutical prepn. are **stable** pellet prepn. containing substituted benzimidazole(s) or their salts and they comprise a quantity of active ingredient of 1-50 mg, an inert core of spherical symmetry with a diameter of 600-1000 µm, constituted by inert excipients, coated with an active layer containing at least one substituted benzimidazole in the micronized form and various pharmaceutically acceptable inert excipients, mixed in suitable proportions in order to allow the disaggregation of the formulations and dissoln. of the active ingredient(s) in an appropriate manner, coated in turn with an insulating layer of a polymer soluble in water, free from alkaline and/or alkaline-earthly metallic salts, of a min. thickness of 15 µm, this layer being coated lastly with a gastro-resistant or enteric layer of a min. thickness of 30 µm. This invention also refers to the process for the preparation of said pharmaceutical prepn.

IT 73590-58-6, Omeprazole 102625-70-7, Pantoprazole 103577-45-3, **Lansoprazole** 104340-86-5, Lemnoprazole 117976-89-3, Pariprazole

RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(preparation of multi-unitary enteric-coated pellet prepn. containing substituted benzimidazoles)

L2 ANSWER 34 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2001:116909 CAPLUS

DOCUMENT NUMBER: 134:125786

TITLE: Comparison of 24-hour intragastric pH using four liquid formulations of **lansoprazole** and omeprazole. [Erratum to document cited in CA132:44775]

AUTHOR(S): Sharma, Virender K.

CORPORATE SOURCE: Division of Gastroenterology, University of Arkansas for Medical Sciences, Little Rock, AR, 72205-7199, USA

SOURCE: American Journal of Health-System Pharmacy (2000), 57(7), 699

CODEN: AHSPEK; ISSN: 1079-2082

PUBLISHER: American Society of Health-System Pharmacists

DOCUMENT TYPE: Journal

LANGUAGE: English

AB On page S21, in the first full paragraph, the third sentence should read as follows: "Quercia and colleagues¹⁷ found that simplified omeprazole suspension 2 mg/mL was **stable** for up to 14 days at room temperature and for 30 days when refrigerated or frozen."

TI Comparison of 24-hour intragastric pH using four liquid formulations of **lansoprazole** and omeprazole. [Erratum to document cited in CA132:44775]

AB On page S21, in the first full paragraph, the third sentence should read as follows: "Quercia and colleagues¹⁷ found that simplified omeprazole suspension 2 mg/mL was **stable** for up to 14 days at room temperature and for 30 days when refrigerated or frozen."

ST erratum **lansoprazole** omeprazole intragastric pH; **lansoprazole** omeprazole intragastric pH erratum

IT Antacids
pH

(comparison of 24-h intragastric pH using four liquid formulations of **lansoprazole** and omeprazole (Erratum))

IT Gastric acid
 RL: BOC (Biological occurrence); BSU (Biological study, unclassified); BIOL (Biological study); OCCU (Occurrence)
 (comparison of 24-h intragastric pH using four liquid formulations of **lansoprazole** and omeprazole (Erratum))

IT 73590-58-6, Omeprazole 103577-45-3, **Lansoprazole**
 RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (comparison of 24-h intragastric pH using four liquid formulations of **lansoprazole** and omeprazole (Erratum))

IT 9000-83-3, ATPase
 RL: BSU (Biological study, unclassified); BIOL (Biological study)
 (hydrogen ion-translocating, inhibitors; comparison of 24-h intragastric pH using four liquid formulations of **lansoprazole** and omeprazole (Erratum))

L2 ANSWER 35 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2000:911051 CAPLUS
 DOCUMENT NUMBER: 134:61541
 TITLE: **Stable** benzimidazole formulation
 INVENTOR(S): Lahav, Raffael; Azoulay, Valerie
 PATENT ASSIGNEE(S): Dexcel Ltd., Israel
 SOURCE: PCT Int. Appl., 28 pp.
 CODEN: PIXXD2
 DOCUMENT TYPE: Patent
 LANGUAGE: English
 FAMILY ACC. NUM. COUNT: 1
 PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 2000078284	A1	20001228	WO 2000-IL364	20000621
W:	AE, AG, AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, BZ, CA, CH, CN, CR, CU, CZ, DE, DK, DM, DZ, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MA, MD, MG, MK, MN, MW, MX, MZ, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, TZ, UA, UG, US, UZ, VN, YU, ZA, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM			
RW:	GH, GM, KE, LS, MW, MZ, SD, SL, SZ, TZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG			
CA 2377605	AA	20001228	CA 2000-2377605	20000621
EP 1187599	A1	20020320	EP 2000-939023	20000621
R:	AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO			

PRIORITY APPLN. INFO.: IL 1999-130602 A 19990622
 WO 2000-IL364 W 20000621

AB A **stable** composition with a benzimidazole derivative, such as omeprazole, which does not contain a separating layer between the active compound and an enteric coating layer is described. Instead, the enteric coating layer is applied as a solution with a pH value of at least 6.5, and more preferably in a range of from about 7 to about 10, directly to the benzimidazole derivative substrate. This solution, with the optional addition of a plasticizer, can be directly coated onto the substrate without any necessity for an intermediate layer. Furthermore, in this pH range, the enteric coating is optionally applicable in an aqueous solution, thereby obviating the need for organic solvents for dissolving the enteric coating material. The resultant formulation maintains the stability of the benzimidazole derivative during

storage and at the same time protects the product during passage through the acidic environment of the stomach. The problem of interaction between the enteric coat and the alkaline core is thus completely eliminated as the enteric coat at this stage is no longer acidic. Thus, an active tablet core contained omeprazole 20, lactose 192.5, MgCO₃ 10, sodium starch glycolate 10, Povidone 10, and sodium stearyl fumarate 7.5 mg. The enteric coating layer comprised HPMCAS 16.1, tri-Et citrate 4.5, sodium lauryl sulfate 0.5, talc 8.04, and NaOH 0.86 mg.

REFERENCE COUNT: 4 THERE ARE 4 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

TI **Stable** benzimidazole formulation

AB A **stable** composition with a benzimidazole derivative, such as omeprazole, which does not contain a separating layer between the active compound and an enteric coating layer is described. Instead, the enteric coating layer is applied as a solution with a pH value of at least 6.5, and more preferably in a range of from about 7 to about 10, directly to the benzimidazole derivative substrate. This solution, with the optional addition of a plasticizer, can be directly coated onto the substrate without any necessity for an intermediate layer. Furthermore, in this pH range, the enteric coating is optionally applicable in an aqueous solution, thereby obviating the need for organic

solvents for dissolving the enteric coating material. The resultant formulation maintains the stability of the benzimidazole derivative during storage and at the same time protects the product during passage through the acidic environment of the stomach. The problem of interaction between the enteric coat and the alkaline core is thus completely eliminated as the enteric coat at this stage is no longer acidic. Thus, an active tablet core contained omeprazole 20, lactose 192.5, MgCO₃ 10, sodium starch glycolate 10, Povidone 10, and sodium stearyl fumarate 7.5 mg. The enteric coating layer comprised HPMCAS 16.1, tri-Et citrate 4.5, sodium lauryl sulfate 0.5, talc 8.04, and NaOH 0.86 mg.

IT Drug delivery systems

(beads; **stable** benzimidazole formulation)

IT Drug delivery systems

(enteric-coated; **stable** benzimidazole formulation)

IT Drug delivery systems

(pellets, enteric-coated; **stable** benzimidazole formulation)

IT Drug delivery systems

(pellets; **stable** benzimidazole formulation)

IT Compression

Dissolution rate

Drug bioavailability

Plasticizers

Spheronization

(**stable** benzimidazole formulation)

IT Drug delivery systems

(tablets, enteric-coated; **stable** benzimidazole formulation)

IT Drug delivery systems

(tablets; **stable** benzimidazole formulation)

IT 73590-58-6, Omeprazole

RL: BPR (Biological process); BSU (Biological study, unclassified); PRP (Properties); THU (Therapeutic use); BIOL (Biological study); PROC (Process); USES (Uses)

(**stable** benzimidazole formulation)

IT 51-17-2D, Benzimidazole, derivs. 102625-70-7, Pantoprazole

103577-45-3, **Lansoprazole** 104340-86-5, Leminoprazole

117976-89-3, Rabeprazole

RL: PRP (Properties); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(**stable** benzimidazole formulation)

IT 68-04-2, Trisodium citrate 77-92-9D, Citric acid, esters 77-93-0,

Triethyl citrate 88-99-3D, Phthalic acid, esters 1310-58-3, Potassium

hydroxide (K(OH)), biological studies 1310-73-2, Sodium hydroxide (Na(OH)), biological studies 1336-21-6, Ammonium hydroxide ((NH₄)(OH)) 9004-38-0, Cellulose acetate phthalate 9050-31-1, Hydroxypropyl methyl cellulose phthalate 25086-15-1, Methacrylic acid-Methyl methacrylate copolymer 28572-98-7, Methacrylic acid-ethyl methacrylate copolymer 52907-01-4, Cellulose acetate trimellitate 53237-50-6 71138-97-1, Hydroxypropyl methyl cellulose acetate succinate 106392-12-5, Poloxamer RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(**stable** benzimidazole formulation)

L2 ANSWER 36 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2000:840390 CAPLUS

DOCUMENT NUMBER: 135:40734

TITLE: Safety review in 10,008 users of **lansoprazole** in daily practice

AUTHOR(S): Claessens, Angela A. M. C.; Heerdink, Eibert R.; Van Eijk, Jacques Th. M.; Lamers, Cornelis B. H. W.; Leufkens, Hubert G. M.

CORPORATE SOURCE: Department of Pharmacoepidemiology and Pharmacotherapy, Utrecht Institute for Pharmaceutical Sciences (UIPS), Utrecht, 3508 TB, Neth.

SOURCE: Pharmacoepidemiology and Drug Safety (2000), 9(5), 383-391

CODEN: PDSAEA; ISSN: 1053-8569

PUBLISHER: John Wiley & Sons Ltd.

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Soon after the introduction of the proton pump inhibitor, **lansoprazole**, a 4-yr observational follow-up study was started to evaluate the safety of this drug in naturally-occurring groups of patients in The Netherlands. Results of this study were compared with clin. trial data and the limited published data from observational studies. A prospective, observational study in which patients with a new episode of **lansoprazole** use were followed during the medication period for a maximum of 2 yr. All (adverse) events during use were documented by the prescriber, irresp. of possible association with **lansoprazole** therapy. A total of 805 general practitioners (GPs) and 266 specialists provided a total of 10,008 **lansoprazole** users with a broad range of diagnoses. Of all patients, 17.4% reported one or more adverse events. The profile and frequency of reported adverse events was consistent with results from clin. trials and other observational studies. The most frequently reported adverse events were diarrhoea, headache, nausea, skin disorders, dizziness and generalized abdominal pain/cramps. There was no new evidence of rare adverse events. Furthermore, no **lansoprazole**-related unlabeled adverse events of clin. significance were recorded. Although the patterns of use of **lansoprazole** in daily practice deviated to some extent from the diagnoses in the information leaflet, **lansoprazole** was found to have a highly acceptable safety profile in this large naturally-occurring group of users. Reporting rates were higher soon after introduction of **lansoprazole** before falling to a lower **stable** level.

REFERENCE COUNT: 25 THERE ARE 25 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

TI Safety review in 10,008 users of **lansoprazole** in daily practice

AB Soon after the introduction of the proton pump inhibitor, **lansoprazole**, a 4-yr observational follow-up study was started to evaluate the safety of this drug in naturally-occurring groups of patients in The Netherlands. Results of this study were compared with clin. trial data and the limited published data from observational studies. A prospective, observational study in which patients with a new episode of **lansoprazole** use were followed during the medication period for a maximum of 2 yr. All (adverse) events during use were documented by the

prescriber, irresp. of possible association with **lansoprazole** therapy. A total of 805 general practitioners (GPs) and 266 specialists provided a total of 10,008 **lansoprazole** users with a broad range of diagnoses. Of all patients, 17.4% reported one or more adverse events. The profile and frequency of reported adverse events was consistent with results from clin. trials and other observational studies. The most frequently reported adverse events were diarrhoea, headache, nausea, skin disorders, dizziness and generalized abdominal pain/cramps. There was no new evidence of rare adverse events. Furthermore, no **lansoprazole**-related unlabeled adverse events of clin. significance were recorded. Although the patterns of use of **lansoprazole** in daily practice deviated to some extent from the diagnoses in the information leaflet, **lansoprazole** was found to have a highly acceptable safety profile in this large naturally-occurring group of users. Reporting rates were higher soon after introduction of **lansoprazole** before falling to a lower **stable** level.

ST **lansoprazole** safety adverse event

IT 9000-23-3

RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(proton-translocating, inhibitor; safety review in 10,008 users of **lansoprazole** in daily practice)

IT 103577-45-3, **Lansoprazole**

RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(safety review in 10,008 users of **lansoprazole** in daily practice)

L2 ANSWER 37 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2000:579978 CAPLUS

DOCUMENT NUMBER: 133:256898

TITLE: Spectrophotometric assay of **lansoprazole** in pharmaceutical dosage formulations

AUTHOR(S): Rajput, Sadhana J.; Patel, Kalpana G.

CORPORATE SOURCE: Pharmacy Department, Faculty of Techno. & Eng., M.S. University of Baroda, Vadodara, 390 001, India

SOURCE: Eastern Pharmacist (2000), 43(506), 101-102

CODEN: EAPHA6; ISSN: 0012-8872

PUBLISHER: Eastern Pharmacist

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Two spectrophotometric methods (I and II) for the determination of **lansoprazole** were developed. Method I is based on ion-pair extraction spectrophotometry as **lansoprazole** can form an extractable ion-pair complex with bromocresol green (BCG). The chromogen shows maximum absorbance at 420 nm and **stable** for 2 h. The Beer's law was obeyed in the concentration range 1 to 20 mcg/mL and reproducibility of the method in method II, the chromogen, obtained after dissolving **lansoprazole** in an acidic solvent, shows the absorption maximum at 410 nm. Beer's law range was obtained in the concentration range 5 to 70 mcg/mL.

Both the methods were used to analyze the **lansoprazole** in its capsule formulations and the results obtained are in good agreement with the labeled amts.

REFERENCE COUNT: 7 THERE ARE 7 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

TI Spectrophotometric assay of **lansoprazole** in pharmaceutical dosage formulations

AB Two spectrophotometric methods (I and II) for the determination of **lansoprazole** were developed. Method I is based on ion-pair extraction

spectrophotometry as **lansoprazole** can form an extractable ion-pair complex with bromocresol green (BCG). The chromogen shows maximum absorbance at 420 nm and **stable** for 2 h. The Beer's law was obeyed in the concentration range 1 to 20 mcg/mL and reproducibility of the method in method II, the chromogen, obtained after dissolving **lansoprazole** in an acidic solvent, shows the absorption maximum at 410 nm. Beer's law range was obtained in the concentration range 5 to 70 mcg/mL.

Both the methods were used to analyze the **lansoprazole** in its capsule formulations and the results obtained are in good agreement with the labeled amts.

ST **lansoprazole** detn spectroscopy bromocresol green

IT Spectrophotometry
(spectrophotometric assay of **lansoprazole** in pharmaceutical dosage formulations)

IT 103577-45-3, **Lansoprazole**

RL: ANT (Analyte); ANST (Analytical study)
(spectrophotometric assay of **lansoprazole** in pharmaceutical dosage formulations)

IT 76-60-8, Bromocresol green

RL: ARG (Analytical reagent use); ANST (Analytical study); USES (Uses)
(spectrophotometric assay of **lansoprazole** in pharmaceutical dosage formulations)

L2 ANSWER 38 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2000:475425 CAPLUS

DOCUMENT NUMBER: 133:94537

TITLE: Pharmaceutical formulations containing inclusion amino acid salts compounds of benzimidazole derivatives with cyclodextrins

INVENTOR(S): Mendes Cerdeira, Ana Maria; De Sousa Goucha, Jorge Pedro Manuel

PATENT ASSIGNEE(S): Tecnimede-Sociedade Tecnico-Medicinal, S.A., Port.

SOURCE: Eur. Pat. Appl., 27 pp.

CODEN: EPXXDW

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
EP 1018340	A1	20000712	EP 1999-670003	19990106
EP 1018340	B1	20030910		
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO				
AT 249218	E	20030915	AT 1999-670003	19990106
PT 1018340	T	20031231	PT 1999-670003	19990106
ES 2149750	T3	20040601	ES 1999-670003	19990106

PRIORITY APPLN. INFO.: EP 1999-670003 A 19990106

AB The present invention concerns new very **stable** inclusion compds. from a hydrosol. basic amino acid salt of a benzimidazole derivative, namely omeprazole, **lansoprazole** and pantoprazole, and one or more cyclodextrins, preferably β -cyclodextrin; the process of their preparation, and their use in the manufacture of a medicine for the prophylactic and

therapeutic treatment of duodenal gastric ulcer, gastro esophageal reflux disease and Zollinger-Ellison-syndrome are also disclosed. To a solution of 7.4 g L-arginine in 200 mL of water was added 3.0 g omeprazole followed by addition of 2.68 g of β -cyclodextrin and stirred for 2 h. After the lyophilization, the resulting inclusion compound (1:5:2) was kept at 40° and 75% RH for 6 mo to show degradation products of 0.8%. A tablet

contained the above inclusion compound 86.8, microcryst. cellulose 213.0, colloidal silica 3.0, and magnesium stearate 3.0 g.

AB The present invention concerns new very **stable** inclusion compds. from a hydrosol. basic amino acid salt of a benzimidazole derivative, namely omeprazole, **lansoprazole** and pantoprazole, and one or more cyclodextrins, preferably β -cyclodextrin; the process of their preparation, and their use in the manufacture of a medicine for the prophylactic and therapeutic treatment of duodenal gastric ulcer, gastro esophageal reflux disease and Zollinger-Ellison-syndrome are also disclosed. To a solution of 7.4 g L-arginine in 200 mL of water was added 3.0 g omeprazole followed by addition of 2.68 g of β -cyclodextrin and stirred for 2 h. After the lyophilization, the resulting inclusion compound (1:5:2) was kept at 40° and 75% RH for 6 mo to show degradation products of 0.8%. A tablet contained the above inclusion compound 86.8, microcryst. cellulose 213.0, colloidal silica 3.0, and magnesium stearate 3.0 g.

L2 ANSWER 39 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2000:407807 CAPLUS

DOCUMENT NUMBER: 133:12609

TITLE: Superiority of **lansoprazole** vs. ranitidine

in healing nonsteroidal anti-inflammatory drug-associated gastric ulcers; results of a double-blind, randomized, multicenter study

AUTHOR(S): Agrawal, Naurang M.; Campbell, Donald R.; Safdi, Michael A.; Lukasik, Nancy L.; Huang, Bidan; Haber, Marian M.; Bailey, Robert J.; Barish, Charles F.; Bianci, Thomas; Birbara, Charles Allen; Bird, Phillip C.; Breiter, Jeffrey R.; Cheng, Edward; Collip, Charles; Davis, Carleton; DeMicco, Michael; Doyle, James; Fleischmann, Roy; Gaddam, Syam P.; Harford, William; Ho, Samuel; Hussey, Keith P.; Jones, James V.; Khandelwal, Mukul; Kogut, David G.; Krause, Richard; Krumholz, Steven; Maton, Paul N.; McElroy, Aubrey; Moskovitz, Morry; Ondrejicka, John, Jr.; Pambianco, Daniel; Ponich, Terry; Pruitt, Ronald E.; Robinson, Malcom; Sabesin, Seymour; Sahba, Bruce; Schwartz, Howard I.; Schwartz, Jerrold; Shah, Nayan R.; Silvers, David; Sontag, Stephen; Strong, Lewis; Winkle, Peter; Winston, Barry; Wolosin, James

CORPORATE SOURCE: NSAID-Associated Gastric Ulcer Study Group, Department of Medicine, University of Connecticut Health Center, Farmington, CT, USA

SOURCE: Archives of Internal Medicine (2000), 160(10), 1455-1461

CODEN: AIMDAP; ISSN: 0003-9926

PUBLISHER: American Medical Association

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Background: The usefulness of nonsteroidal anti-inflammatory drugs (NSAIDs) is limited by adverse gastrointestinal tract events. Objective: To identify the optimal antisecretory therapy for healing of gastric ulcer in patients using NSAIDs and the impact of concurrent *Helicobacter pylori* infection on ulcer healing. Design: Prospective, double-blind, multicenter, parallel-group study. Setting: Gastroenterol. practices in ambulatory and referral center settings. Patients: Three hundred fifty-three patients with an active, nonmalignant gastric ulcer at least 5 mm in diameter confirmed by endoscopy and biopsy and who continued to receive **stable** doses of NSAIDs. Intervention: Patients were randomized to receive ranitidine hydrochloride, 150 mg twice daily, or **lansoprazole**, 15 mg or 30 mg once daily, for 8 wk. Measurements: Healing was assessed by endoscopy at 4 and 8 wk in an intent-to-treat

population. *Helicobacter pylori* status was assessed by histol. examination Results: After 8 wk of treatment, healing was observed in 61 (53%) of 115, 81 (69%) of 118, and 85 (73%) of 117 patients receiving ranitidine **lansoprazole**, 15 mg, and **lansoprazole**, 30 mg, resp. ($P < .05$ for ranitidine vs. both **lansoprazole** doses; 95% confidence interval, 3.2-28.0 for ranitidine vs. **lansoprazole**, 15 mg, and 7.4-31.8 for ranitidine vs. **lansoprazole**, 30 mg). The gastric ulcer healing rates were similar between *H pylori*-infected and -noninfected patients, with a statistically significant increase with the use of **lansoprazole** vs. ranitidine. Conclusions: In patients who require continuous treatment with NSAIDs, **lansoprazole** is superior to ranitidine for healing of NSAID-associated gastric ulcers. Healing is not delayed by the presence of *H pylori* infection.

REFERENCE COUNT: 28 THERE ARE 28 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

- TI Superiority of **lansoprazole** vs. ranitidine in healing nonsteroidal anti-inflammatory drug-associated gastric ulcers; results of a double-blind, randomized, multicenter study
- AB Background: The usefulness of nonsteroidal anti-inflammatory drugs (NSAIDs) is limited by adverse gastrointestinal tract events. Objective: To identify the optimal antisecretory therapy for healing of gastric ulcer in patients using NSAIDs and the impact of concurrent *Helicobacter pylori* infection on ulcer healing. Design: Prospective, double-blind, multicenter, parallel-group study. Setting: Gastroenterol. practices in ambulatory and referral center settings. Patients: Three hundred fifty-three patients with an active, nonmalignant gastric ulcer at least 5 mm in diameter confirmed by endoscopy and biopsy and who continued to receive stable doses of NSAIDs. Intervention: Patients were randomized to receive ranitidine hydrochloride, 150 mg twice daily, or **lansoprazole**, 15 mg or 30 mg once daily, for 8 wk. Measurements: Healing was assessed by endoscopy at 4 and 8 wk in an intent-to-treat population. *Helicobacter pylori* status was assessed by histol. examination Results: After 8 wk of treatment, healing was observed in 61 (53%) of 115, 81 (69%) of 118, and 85 (73%) of 117 patients receiving ranitidine **lansoprazole**, 15 mg, and **lansoprazole**, 30 mg, resp. ($P < .05$ for ranitidine vs. both **lansoprazole** doses; 95% confidence interval, 3.2-28.0 for ranitidine vs. **lansoprazole**, 15 mg, and 7.4-31.8 for ranitidine vs. **lansoprazole**, 30 mg). The gastric ulcer healing rates were similar between *H pylori*-infected and -noninfected patients, with a statistically significant increase with the use of **lansoprazole** vs. ranitidine. Conclusions: In patients who require continuous treatment with NSAIDs, **lansoprazole** is superior to ranitidine for healing of NSAID-associated gastric ulcers. Healing is not delayed by the presence of *H pylori* infection.
- ST **lansoprazole** ranitidine NSAID ulcer helicobacter infection
- IT Antiulcer agents
Helicobacter pylori
 (**lansoprazole** vs. ranitidine for healing NSAID-associated gastric ulcers and effect of *H pylori* infection in humans)
- IT Anti-inflammatory agents
 (nonsteroidal; **lansoprazole** vs. ranitidine for healing NSAID-associated gastric ulcers and effect of *H pylori* infection in humans)
- IT Stomach, disease
 (ulcer; **lansoprazole** vs. ranitidine for healing NSAID-associated gastric ulcers and effect of *H pylori* infection in humans)
- IT 66357-35-5, Ranitidine 103577-45-3, **Lansoprazole**
 RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (**lansoprazole** vs. ranitidine for healing NSAID-associated gastric ulcers and effect of *H pylori* infection in humans)

L2 ANSWER 40 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 2000:382805 CAPLUS

DOCUMENT NUMBER: 133:22290

TITLE: Stability of suspension formulations of

lansoprazole and omeprazole stored in
amber-colored plastic oral syringesAUTHOR(S): DiGiacinto, Jennifer L.; Olsen, Keith M.; Bergman,
Kimberly L.; Hoie, Eric B.CORPORATE SOURCE: Clinical Pharmacology, Department of Biomedical and
Therapeutic Sciences, University of Illinois College
of Medicine at Peoria, Peoria, IL, USA

SOURCE: Annals of Pharmacotherapy (2000), 34(5), 600-605

CODEN: APHRER; ISSN: 1060-0280

PUBLISHER: Harvey Whitney Books Co.

DOCUMENT TYPE: Journal

LANGUAGE: English

AB OBJECTIVE: To determine the stability of **lansoprazole** and omeprazole suspensions at ambient and refrigerated temps. using HPLC. DESIGN: The contents of **lansoprazole** and omeprazole capsules were suspended in sep. flasks containing sodium bicarbonate 8.4% to concns. of 3 and 2 mg/mL, resp. The contents of each flask were drawn into 6 amber oral syringes, with one-half of the syringes stored at 22° (ambient) and the other half at 4°. **Lansoprazole** and omeprazole concns. were determined by a stability-indicating HPLC assay at baseline and at 4, 8, 12, and 24 h, and on days 4, 7, 14, 21, 30, 45, and 60 after mixing. Both omeprazole and **lansoprazole** were considered **stable** if they retained ≥90% of the baseline drug concentration RESULTS: Omeprazole was **stable** for up to 14 days at 22° and 45 days at 4°. **Lansoprazole** was **stable** for 8 h at 22° and for 14 days at 4°. CONCLUSIONS: When compared with ambient or refrigerated storage conditions, omeprazole was **stable** for a longer duration than **lansoprazole**. Pharmacists may use these results to guide compounding and storage of proton-pump inhibitor suspensions.

REFERENCE COUNT: 7 THERE ARE 7 CITED REFERENCES AVAILABLE FOR THIS
RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

TI Stability of suspension formulations of **lansoprazole** and
omeprazole stored in amber-colored plastic oral syringes

AB OBJECTIVE: To determine the stability of **lansoprazole** and omeprazole suspensions at ambient and refrigerated temps. using HPLC. DESIGN: The contents of **lansoprazole** and omeprazole capsules were suspended in sep. flasks containing sodium bicarbonate 8.4% to concns. of 3 and 2 mg/mL, resp. The contents of each flask were drawn into 6 amber oral syringes, with one-half of the syringes stored at 22° (ambient) and the other half at 4°. **Lansoprazole** and omeprazole concns. were determined by a stability-indicating HPLC assay at baseline and at 4, 8, 12, and 24 h, and on days 4, 7, 14, 21, 30, 45, and 60 after mixing. Both omeprazole and **lansoprazole** were considered **stable** if they retained ≥90% of the baseline drug concentration RESULTS: Omeprazole was **stable** for up to 14 days at 22° and 45 days at 4°. **Lansoprazole** was **stable** for 8 h at 22° and for 14 days at 4°. CONCLUSIONS: When compared with ambient or refrigerated storage conditions, omeprazole was **stable** for a longer duration than **lansoprazole**. Pharmacists may use these results to guide compounding and storage of proton-pump inhibitor suspensions.

ST stability suspension plastic syringe **lansoprazole** omeprazole

IT Syringes

(stability of suspension formulations of **lansoprazole** and
omeprazole stored in amber plastic oral syringes)

IT Polymers, uses

RL: DEV (Device component use); USES (Uses)
 (stability of suspension formulations of **lansoprazole** and
 omeprazole stored in amber plastic oral syringes)

IT Drug delivery systems

(suspensions; stability of suspension formulations of
lansoprazole and omeprazole stored in amber plastic oral
 syringes)

IT 73590-58-6, Omeprazole 103577-45-3, **Lansoprazole**

RL: PRP (Properties); THU (Therapeutic use); BIOL (Biological study); USES
 (Uses)

(stability of suspension formulations of **lansoprazole** and
 omeprazole stored in amber plastic oral syringes)

L2 ANSWER 41 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 1999:764804 CAPLUS

DOCUMENT NUMBER: 132:216466

TITLE: A rapid high-performance liquid chromatographic
 determination of **Lansoprazole** in human serum

AUTHOR(S): Zaater, M. F.; Najib, N.; Ghanem, E.

CORPORATE SOURCE: Department of Applied Chemical Sciences, Jordan
 University of Science and Technology (JUST), Irbid,
 Jordan

SOURCE: Saudi Pharmaceutical Journal (1999), 7(3), 123-129
 CODEN: SPJOEM; ISSN: 1319-0164

PUBLISHER: Saudi Pharmaceutical Society

DOCUMENT TYPE: Journal

LANGUAGE: English

AB A simple and rapid reversed-phase high-performance liquid chromatog.
 (RP-HPLC) method with UV detection has been described for the determination of
Lansoprazole in human serum. Carbamazepine was used as internal
 standard The drug and the internal standard in serum were extracted twice
 with di-Et

ether, followed by evaporation, reconstitution in the mobile phase, and
 injection into the chromatog. system. The method utilized a Nova-Pak C18
 4- μ m column (150+3.9 mm i.d.) together with an isocratic mobile
 phase which consisted of 0.02M sodium dihydrogenphosphate-acetonitrile-
 methanol (58:23:19%, volume/volume/volume). The mobile phase was adjusted to

pH

7.3 with 5M NaOH and pumped at a flow rate of 1.8 mL/min. The UV detector
 was set at 285 nm. Running time per single anal. was <4 min. The
 response of the assay was linear with a correlation coefficient of $r=0.9993$.
 The within and between-day coeffs. of variation for 3 different concns.
 (50-1500 ng/mL) ranged from 1.14 to 8.26% and from 1.66 to 8.02%, resp.
 The average recovery of the concentration range stated was better than 96.5%.
 Stability testing revealed that **Lansoprazole** was **stable**
 in serum at -20° for 2 wk. The method was successfully applied in
 a bioassay study of 2 products each in the form of enteric-coated granules
 in capsules containing 30 mg **Lansoprazole**, administered orally to 18
 healthy male volunteers.

REFERENCE COUNT: 13 THERE ARE 13 CITED REFERENCES AVAILABLE FOR THIS
 RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

TI A rapid high-performance liquid chromatographic determination of
Lansoprazole in human serum

AB A simple and rapid reversed-phase high-performance liquid chromatog.
 (RP-HPLC) method with UV detection has been described for the determination of
Lansoprazole in human serum. Carbamazepine was used as internal
 standard The drug and the internal standard in serum were extracted twice
 with di-Et

ether, followed by evaporation, reconstitution in the mobile phase, and
 injection into the chromatog. system. The method utilized a Nova-Pak C18
 4- μ m column (150+3.9 mm i.d.) together with an isocratic mobile
 phase which consisted of 0.02M sodium dihydrogenphosphate-acetonitrile-

methanol (58:23:19%, volume/volume/volume). The mobile phase was adjusted to pH 7.3 with 5M NaOH and pumped at a flow rate of 1.8 mL/min. The UV detector was set at 285 nm. Running time per single anal. was <4 min. The response of the assay was linear with a correlation coefficient of $r=0.9993$. The within and between-day coeffs. of variation for 3 different concns. (50-1500 ng/mL) ranged from 1.14 to 8.26% and from 1.66 to 8.02%, resp. The average recovery of the concentration range stated was better than 96.5%. Stability testing revealed that **Lansoprazole** was **stable** in serum at -20° for 2 wk. The method was successfully applied in a bioassay study of 2 products each in the form of enteric-coated granules in capsules containing 30 mg **Lansoprazole**, administered orally to 18 healthy male volunteers.

ST **Lansoprazole** detn serum human HPLC; liq chromatog
Lansoprazole serum human

IT Blood analysis
(Lansoprazole detn in blood serum of humans by reversed-phase HPLC)

IT 103577-45-3, **Lansoprazole**
RL: ANT (Analyte); ANST (Analytical study)
(Lansoprazole detn in blood serum of humans by reversed-phase HPLC)

L2 ANSWER 42 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 1999:763691 CAPLUS

DOCUMENT NUMBER: 132:6362

TITLE: A **stable** oral pharmaceutical composition containing a substituted pyridylsulfinyl benzimidazole

INVENTOR(S): Thacharodi, Dilip Kumar; Kampal, Ashok

PATENT ASSIGNEE(S): Ranbaxy Laboratories, Limited, India

SOURCE: Eur. Pat. Appl., 15 pp.

CODEN: EPXXDW

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 2

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
EP 960620	A1	19991201	EP 1998-123251	19981207
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO				
ZA 9810765	A	19990806	ZA 1998-10765	19981125
RU 2216321	C2	20031120	RU 1998-122664	19981209
CN 1237415	A	19991208	CN 1998-125528	19981218
WO 9961022	A1	19991202	WO 1999-IB139	19990126
W: AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CU, CZ, DE, DK, EE, ES, FI, GB, GD, GE, GH, GM, HR, HU, ID, IL, IN, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, UA, UG, US, UZ, VN, YU, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM				
RW: GH, GM, KE, LS, MW, SD, SZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG				
AU 9919797	A1	19991213	AU 1999-19796	19990126
BR 9910723	A	20010612	BR 1999-10723	19990126
PRIORITY APPLN. INFO.:			US 1998-86224	A 19980528
			WO 1999-IB139	W 19990126

OTHER SOURCE(S): MARPAT 132:6362

AB A pharmaceutical composition which is **stable** and suitable for oral administration to a patient comprises a mixture of a substituted pyridyl

sulfinyl benzimidazole having gastric acid secretion inhibitory activity (such as omeprazole, **lansoprazole**, or pantoprazole), and a pharmaceutically acceptable carrier. The carrier comprises a polymer having vinylpyrrolidone monomeric units, such as polyvinylpyrrolidone or a vinyl pyrrolidone-vinyl acetate copolymer. Surprisingly, it has been found that the vinylpyrrolidone polymer acts as a stabilizing excipient on the substituted pyridyl sulfinyl benzimidazole so that the composition need not include any alkaline components to prevent degradation of the active

ingredient.

In a preferred embodiment, the composition is in the form of a capsule, whereby the mixture of the substituted pyridyl sulfinyl benzimidazole and the vinyl pyrrolidone polymer in the form of a powder blend or granules, is contained within a capsule shell, which capsule shell is made from an enteric material or is coated with an enteric material. Capsules were prepared containing omeprazole 20.00 and crosslinked PVP 100 mg/capsule.

REFERENCE COUNT: 4 THERE ARE 4 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

TI A **stable** oral pharmaceutical composition containing a substituted pyridylsulfinyl benzimidazole

AB A pharmaceutical composition which is **stable** and suitable for oral administration to a patient comprises a mixture of a substituted pyridyl sulfinyl benzimidazole having gastric acid secretion inhibitory activity (such as omeprazole, **lansoprazole**, or pantoprazole), and a pharmaceutically acceptable carrier. The carrier comprises a polymer having vinylpyrrolidone monomeric units, such as polyvinylpyrrolidone or a vinyl pyrrolidone-vinyl acetate copolymer. Surprisingly, it has been found that the vinylpyrrolidone polymer acts as a stabilizing excipient on the substituted pyridyl sulfinyl benzimidazole so that the composition need not include any alkaline components to prevent degradation of the active ingredient.

In a preferred embodiment, the composition is in the form of a capsule, whereby the mixture of the substituted pyridyl sulfinyl benzimidazole and the vinyl pyrrolidone polymer in the form of a powder blend or granules, is contained within a capsule shell, which capsule shell is made from an enteric material or is coated with an enteric material. Capsules were prepared containing omeprazole 20.00 and crosslinked PVP 100 mg/capsule.

IT Drug delivery systems
(capsules; **stable** oral pharmaceutical composition containing a substituted pyridylsulfinyl benzimidazole)

IT Drug delivery systems
(granules; **stable** oral pharmaceutical composition containing a substituted pyridylsulfinyl benzimidazole)

IT Drug delivery systems
(oral; **stable** oral pharmaceutical composition containing a substituted pyridylsulfinyl benzimidazole)

IT Gastric acid
(secretion, inhibitors; **stable** oral pharmaceutical composition containing a substituted pyridylsulfinyl benzimidazole)

IT Antacids
(**stable** oral pharmaceutical composition containing a substituted pyridylsulfinyl benzimidazole)

IT Glycerides, biological studies
RL: MOA (Modifier or additive use); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(**stable** oral pharmaceutical composition containing a substituted pyridylsulfinyl benzimidazole)

IT Drug delivery systems
(tablets; **stable** oral pharmaceutical composition containing a substituted pyridylsulfinyl benzimidazole)

IT 9003-39-8, Pvp 25086-89-9, Vinyl acetate-vinylpyrrolidone copolymer
RL: MOA (Modifier or additive use); PRP (Properties); THU (Therapeutic use); BIOL (Biological study); USES (Uses)

(stable oral pharmaceutical composition containing a substituted pyridylsulfinyl benzimidazole)

IT 73590-58-6, Omeprazole 102625-70-7, Pantoprazole 103577-45-3,
Lansoprazole
RL: PEP (Physical, engineering or chemical process); PRP (Properties); THU (Therapeutic use); BIOL (Biological study); PROC (Process); USES (Uses)
(stable oral pharmaceutical composition containing a substituted pyridylsulfinyl benzimidazole)

L2 ANSWER 43 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN
ACCESSION NUMBER: 1999:639980 CAPLUS
DOCUMENT NUMBER: 131:341883
TITLE: Effect of various salts on the stability of
lansoprazole, omeprazole, and pantoprazole as
determined by high-performance liquid chromatography
AUTHOR(S): Ekpe, Anthony; Jacobsen, Thomas
CORPORATE SOURCE: Bayer Corporation, Morristown, NJ, 07962-1910, USA
SOURCE: Drug Development and Industrial Pharmacy (1999),
25(9), 1057-1065
CODEN: DDIPD8; ISSN: 0363-9045
PUBLISHER: Marcel Dekker, Inc.
DOCUMENT TYPE: Journal
LANGUAGE: English

AB A fast and reproducible reversed-phase HPLC method was developed for the simultaneous determination of omeprazole, **lansoprazole**, and pantoprazole. The 3 compds. were monitored at 280 nm by using Zorbax Eclipse XDB C8 (5 µm, 150 cm + 4.6 mm i.d.) and a mobile phase consisting of 700:300 phosphate buffer-MeCN with the pH adjusted to 7.0 with phosphoric acid. The method was used to study the effect of pH and various salts on the stability of the 3 compds. The pH rate profile curve showed that pantoprazole was the most **stable** compound and **lansoprazole** the least **stable**. The stabilities of the compds. in salt solns. were in the following order: phosphate buffer < trisodium citrate < citrate buffer ≤ acetate buffer < citric acid ≤ monosodium citrate ≤ calcium carbonate < sodium bicarbonate < sodium chloride < water. The rate of degradation had a direct relationship with the H⁺ and salt concentration

REFERENCE COUNT: 11 THERE ARE 11 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

TI Effect of various salts on the stability of **lansoprazole**, omeprazole, and pantoprazole as determined by high-performance liquid chromatography

AB A fast and reproducible reversed-phase HPLC method was developed for the simultaneous determination of omeprazole, **lansoprazole**, and pantoprazole. The 3 compds. were monitored at 280 nm by using Zorbax Eclipse XDB C8 (5 µm, 150 cm + 4.6 mm i.d.) and a mobile phase consisting of 700:300 phosphate buffer-MeCN with the pH adjusted to 7.0 with phosphoric acid. The method was used to study the effect of pH and various salts on the stability of the 3 compds. The pH rate profile curve showed that pantoprazole was the most **stable** compound and **lansoprazole** the least **stable**. The stabilities of the compds. in salt solns. were in the following order: phosphate buffer < trisodium citrate < citrate buffer ≤ acetate buffer < citric acid ≤ monosodium citrate ≤ calcium carbonate < sodium bicarbonate < sodium chloride < water. The rate of degradation had a direct relationship with the H⁺ and salt concentration

ST salt stability **lansoprazole** HPLC detn; omeprazole stability salt HPLC detn; pantoprazole stability salt HPLC detn; chromatog liq drug stability salt detn

IT Buffers
(salts effect on stability of **lansoprazole** and omeprazole and pantoprazole determination by HPLC)

- IT Salts, biological studies
 RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (salts effect on stability of **lansoprazole** and omeprazole and pantoprazole determination by HPLC)
- IT 73590-58-6, Omeprazole 102625-70-7, Pantoprazole 103577-45-3, **Lansoprazole**
 RL: ANT (Analyte); PRP (Properties); THU (Therapeutic use); ANST (Analytical study); BIOL (Biological study); USES (Uses)
 (salts effect on stability of **lansoprazole** and omeprazole and pantoprazole determination by HPLC)
- IT 68-04-2, Trisodium citrate 77-92-9, Citric acid, biological studies 144-55-8, Carbonic acid monosodium salt, biological studies 471-34-1, Calcium carbonate, biological studies 7647-14-5, Sodium chloride, biological studies 18996-35-5, Monosodium citrate
 RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (salts effect on stability of **lansoprazole** and omeprazole and pantoprazole determination by HPLC)

L2 ANSWER 44 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 1999:277794 CAPLUS

DOCUMENT NUMBER: 130:301825

TITLE: Nonaqueous capillary electrophoresis for the analysis of labile pharmaceutical compounds

AUTHOR(S): Tivesten, A.; Folestad, S.; Schonbacher, V.; Svensson, K.

CORPORATE SOURCE: Astra Hassle AB, Moelndal, S-43183, Swed.

SOURCE: Chromatographia (1999), 49(Suppl. 1), S7-S11

CODEN: CHRGB7; ISSN: 0009-5893

PUBLISHER: Friedrich Vieweg & Sohn Verlagsgesellschaft mbH

DOCUMENT TYPE: Journal

LANGUAGE: English

AB A screening method using nonaq. capillary electrophoresis (NACE) has been developed for purity anal. of pyridinyl-methyl-sulfinyl-benzimidazoles (PMSB). Eight different polar organic solvents were tested as background electrolytes. N-methylformamide (NMF) was found to have the best properties in respect of both electrophoretic behavior and high solubility of five different model compds. Optimization of the CE separation with-regard to the effects of addition of various electrolyte modifiers is reported. An addnl. feature of amide solvents, rarely utilized in CE, is their intrinsic basic nature; this is of particular interest for anal. of compds. such as the PMSB, the degradation of which is acid-catalyzed. It is shown here that these compds. are **stable** at room temperature for weeks in NMF solution. Results from quant. application of the NACE method were highly precise (typically 1.8% RSD for normalized peak area); linearity was good and detection limit in drug purity determination was low (.apprx.0.05 area % relative to the drug compound).

REFERENCE COUNT: 19 THERE ARE 19 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

AB A screening method using nonaq. capillary electrophoresis (NACE) has been developed for purity anal. of pyridinyl-methyl-sulfinyl-benzimidazoles (PMSB). Eight different polar organic solvents were tested as background electrolytes. N-methylformamide (NMF) was found to have the best properties in respect of both electrophoretic behavior and high solubility of five different model compds. Optimization of the CE separation with-regard to the effects of addition of various electrolyte modifiers is reported. An addnl. feature of amide solvents, rarely utilized in CE, is their intrinsic basic nature; this is of particular interest for anal. of compds. such as the PMSB, the degradation of which is acid-catalyzed. It is shown here that these compds. are **stable** at room temperature for weeks in NMF solution. Results from quant. application of the NACE method were highly precise (typically 1.8% RSD for normalized peak area); linearity was good and detection limit in drug purity determination was low (.apprx.0.05

10/773,535

area % relative to the drug compound).

ST pantoprazole **lansoprazole** omeprazole detn nonaq capillary electrophoresis; rabeprazole picoprazole detn nonaq capillary electrophoresis

IT 73590-58-6, Omeprazole 78090-11-6, Picoprazole 102625-70-7, Pantoprazole 103577-45-3, **Lansoprazole** 117976-89-3, Rabeprazole

RL: ANT (Analyte); THU (Therapeutic use); ANST (Analytical study); BIOL (Biological study); USES (Uses)

(nonaq. capillary electrophoresis for the anal. of labile pharmaceutical compds.)

L2 ANSWER 45 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 1998:742256 CAPLUS

DOCUMENT NUMBER: 130:7429

TITLE: **Stable** oral pharmaceutical dosage forms

INVENTOR(S): Chen, Jivn-ren

PATENT ASSIGNEE(S): Sage Pharmaceuticals, Inc., USA

SOURCE: PCT Int. Appl., 28 pp.
CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 9850019	A1	19981112	WO 1998-US9449	19980508
W:	AL, AM, AT, AU, AZ, BA, BB, BG, BR, BY, CA, CH, CN, CU, CZ, DE, DK, EE, ES, FI, GB, GE, GH, HU, IL, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LU, LV, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO, RU, SD, SE, SG, SI, SK, SL, TJ, TM, TR, TT, UA, UG, US, US, UZ, VN, YU, ZW, AM, AZ, BY, KG, KZ, MD, RU, TJ, TM			
RW:	GH, GM, KE, LS, MW, SD, SZ, UG, ZW, AT, BE, CH, CY, DE, DK, ES, FI, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM, GA, GN, ML, MR, NE, SN, TD, TG			
AU 9873755	A1	19981127	AU 1998-73755	19980508
JP 2001524131	T2	20011127	JP 1998-548544	19980508
TW 550090	B	20030901	TW 1998-87107174	19980508
US 2001006649	A1	20010705	US 1998-141476	19980827
US 6726927	B2	20040427		
US 2003203018	A1	20031030	US 2003-422338	20030424
US 2004197394	A1	20041007	US 2004-831809	20040426
PRIORITY APPLN. INFO.:			US 1997-46089P	P 19970509
			US 1997-950432	A2 19971015
			WO 1998-US9449	W 19980508
			US 1998-141476	A3 19980827

AB The present invention relates to new **stable** enteric coated pharmaceutical dosage forms for oral use containing Omeprazole or **Lansoprazole**, to a formulation and a method for the manufacture of such a dosage form, and to a method of gastric acid pump inhibition and providing gastrointestinal cytoprotective benefit by using them. Core granulations containing omeprazole and calcium carbonate were prepared, encapsulated or directly compressed into tablets with appropriate excipients.

REFERENCE COUNT: 2 THERE ARE 2 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

TI **Stable** oral pharmaceutical dosage forms

AB The present invention relates to new **stable** enteric coated pharmaceutical dosage forms for oral use containing Omeprazole or **Lansoprazole**, to a formulation and a method for the manufacture of such a dosage form, and to a method of gastric acid pump inhibition and

providing gastrointestinal cytoprotective benefit by using them. Core granulations containing omeprazole and calcium carbonate were prepared, encapsulated or directly compressed into tablets with appropriate excipients.

- ST oral pharmaceutical **stable**
 IT Drug delivery systems
 (capsules; **stable** oral pharmaceutical dosage forms)
 IT Coating materials
 (enteric; **stable** oral pharmaceutical dosage forms)
 IT Drug delivery systems
 (oral; **stable** oral pharmaceutical dosage forms)
 IT Granulation
 (**stable** oral pharmaceutical dosage forms)
 IT Polyoxyalkylenes, biological studies
 RL: MOA (Modifier or additive use); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (**stable** oral pharmaceutical dosage forms)
 IT Drug delivery systems
 (tablets; **stable** oral pharmaceutical dosage forms)
 IT 50-70-4, Sorbitol, biological studies 50-99-7, D-Glucose, biological studies 63-42-3, Lactose 69-65-8, D-Mannitol 79-41-4D, Methacrylic acid, polymers 144-55-8, Sodium bicarbonate, biological studies 151-21-3, Sodium lauryl sulfate, biological studies 471-34-1, Calcium carbonate, biological studies 557-04-0, Magnesium stearate 1327-43-1, Magnesium aluminum silicate 1592-23-0, Calcium stearate 7558-79-4, Dibasic sodium phosphate 7757-93-9, Dicalcium phosphate 7758-87-4, Tricalcium phosphate 9003-20-7, Polyvinyl acetate 9004-32-4, Sodium CM-cellulose 9004-34-6, Cellulose, biological studies 9004-38-0, Cellulose acetate phthalate 9004-53-9, Dextrin 9004-62-0, Hydroxyethyl cellulose 9004-65-3, HPMC 9005-25-8, Starch, biological studies 9050-04-8, Calcium CM-cellulose 9050-31-1, Hydroxypropyl methyl cellulose phthalate 9050-36-6, Maltodextrin 14807-96-6, Talcum, biological studies 25322-68-3 31566-31-1, Glycerol monostearate 52907-01-4, Cellulose acetate trimellitate 71138-97-1, Hydroxypropyl methyl cellulose acetate succinate
 RL: MOA (Modifier or additive use); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (**stable** oral pharmaceutical dosage forms)
 IT 73590-58-6, Omeprazole 95510-70-6 95510-71-7 95510-72-8 103577-45-3, **Lansoprazole** 114801-85-3
 RL: PEP (Physical, engineering or chemical process); PRP (Properties); THU (Therapeutic use); BIOL (Biological study); PROC (Process); USES (Uses)
 (**stable** oral pharmaceutical dosage forms)
 IT 64-17-5, Ethanol, biological studies 67-56-1, Methanol, biological studies 67-63-0, Isopropanol, biological studies 77-93-0, Triethyl citrate 141-78-6, Acetic acid ethyl ester, biological studies
 RL: PEP (Physical, engineering or chemical process); THU (Therapeutic use); BIOL (Biological study); PROC (Process); USES (Uses)
 (**stable** oral pharmaceutical dosage forms)

L2 ANSWER 46 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 1997:764470 CAPLUS

DOCUMENT NUMBER: 128:7393

TITLE: Spectrophotometric determination of **lansoprazole** in its dosage forms

AUTHOR(S): Meyyanathan, S. N.; Raj, J. R. Aravinda; Suresh, B.

CORPORATE SOURCE: Dept. of Pharmaceutical Chemistry, J.S.S. College of Pharmacy, Ootacamund, 643 001, India

SOURCE: Indian Drugs (1997), 34(7), 403-406

CODEN: INDRBA; ISSN: 0019-462X

PUBLISHER: Indian Drug Manufacturers' Association

DOCUMENT TYPE: Journal

LANGUAGE: English

AB A spectrophotometric method for the determination of **lansoprazole** in dosage forms was based on the use of acetyl chloride in the presence of 1% CuSO₄ solution. A yellowish-red chromogen formed had an absorption maximum at 478.5 nm and was **stable** for 3 h. Beer's Law was obeyed in the concentration range of 100.0 - 600.0 µg/mL. The reproducibility of the method was 99.6%-100.9%. When the drug solution was treated with the 0.3% 3-methyl-2-benzothiazolinone hydrazone reagent in the presence of 1% ceric ammonium sulfate solution in 1N H₂SO₄ a red solution developed, which forms the basis for another method of determination. The chromogen, which had a λ_{max} at 491 nm, was **stable** for 90 min. Beer's Law was obeyed in the concentration range of 100.0-500.0 µg/mL. The reproducibility of the method was 99.5-101.0%.

REFERENCE COUNT: 4 THERE ARE 4 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

TI Spectrophotometric determination of **lansoprazole** in its dosage forms

AB A spectrophotometric method for the determination of **lansoprazole** in dosage forms was based on the use of acetyl chloride in the presence of 1% CuSO₄ solution. A yellowish-red chromogen formed had an absorption maximum at 478.5 nm and was **stable** for 3 h. Beer's Law was obeyed in the concentration range of 100.0 - 600.0 µg/mL. The reproducibility of the method was 99.6%-100.9%. When the drug solution was treated with the 0.3% 3-methyl-2-benzothiazolinone hydrazone reagent in the presence of 1% ceric ammonium sulfate solution in 1N H₂SO₄ a red solution developed, which forms the basis for another method of determination. The chromogen, which had a λ_{max} at 491 nm, was **stable** for 90 min. Beer's Law was obeyed in the concentration range of 100.0-500.0 µg/mL. The reproducibility of the method was 99.5-101.0%.

ST **lansoprazole** detn spectrophotometry

IT 103577-45-3, **Lansoprazole**

RL: ANT (Analyte); ANST (Analytical study)
(spectrophotometric determination of **lansoprazole** in dosage forms)

IT 75-36-5, Acetyl chloride 1128-67-2, 3-Methyl-2-benzothiazolinone hydrazone 7637-03-8, Ceric ammonium sulfate

RL: ARG (Analytical reagent use); ANST (Analytical study); USES (Uses)
(spectrophotometric determination of **lansoprazole** in dosage forms)

L2 ANSWER 47 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 1997:724334 CAPLUS

DOCUMENT NUMBER: 127:362535

TITLE: Study of influence of temperature and grinding on the crystalline state of **lansoprazole**

AUTHOR(S): Vrecer, F.; Kramar, A.; Curin, A.; Grcman, M.; Kotar-Jordan, B.

CORPORATE SOURCE: KRKA, d.d., Novo Mesto, R&D Division, Novo Mesto, 8000, Slovenia

SOURCE: Farmaceutski Vestnik (Ljubljana) (1997), 48(Pos. Stev.), 242-243

CODEN: FMVTAV; ISSN: 0014-8229

PUBLISHER: Slovensko Farmaceutsko Drustvo

DOCUMENT TYPE: Journal

LANGUAGE: English

AB The polymorphic form B of **lansoprazole** underwent a spontaneous transformation into the **stable** form. The transformation was facilitated by temperature and applied mech. stress. Thus, in spite of a faster dissoln. rate of the form B than that of the form A, the form B cannot be used as such in the development of the dosage forms.

REFERENCE COUNT: 6 THERE ARE 6 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

TI Study of influence of temperature and grinding on the crystalline state of

lansoprazole
 AB The polymorphic form B of **lansoprazole** underwent a spontaneous transformation into the **stable** form. The transformation was facilitated by temperature and applied mech. stress. Thus, in spite of a faster dissoln. rate of the form B than that of the form A, the form B cannot be used as such in the development of the dosage forms.
 ST **lansoprazole** polymorphism temp grinding
 IT Crystal morphology
 Grinding (size reduction)
 Polymorphism (crystal)
 (temperature and grinding effect on crystalline state of **lansoprazole**)
 IT 103577-45-3, **Lansoprazole**
 RL: PRP (Properties); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (temperature and grinding effect on crystalline state of **lansoprazole**)

L2 ANSWER 48 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 1997:41878 CAPLUS

DOCUMENT NUMBER: 126:139481

TITLE: Nicotinamide Derivatives as a New Class of Gastric H⁺/K⁺-ATPase Inhibitors. 1. Synthesis and Structure-Activity Relationships of N-Substituted 2-(Benzhydryl- and benzylsulfinyl)nicotinamides

AUTHOR(S): Terauchi, Hideo; Tanitame, Akihiko; Tada, Keiko; Nakamura, Keiji; Seto, Yasuhiro; Nishikawa, Yoshinori
 CORPORATE SOURCE: Discovery Research Laboratories, Dainippon Pharmaceutical Company Ltd., Suita, 564, Japan

SOURCE: Journal of Medicinal Chemistry (1997), 40(3), 313-321
 CODEN: JMCMAR; ISSN: 0022-2623

PUBLISHER: American Chemical Society

DOCUMENT TYPE: Journal

LANGUAGE: English

AB A new series of N-Substituted 2-(benzhydryl- and benzylsulfinyl)nicotinamides were synthesized. Upon acid activation in the acidic environment of the parietal cell, these compds. are converted into their active forms, 2,3-dihydro-3-oxoisothiazolo[5,4-b]pyridines, which inhibit gastric H⁺/K⁺-ATPase. Inhibitory activities against [14C]aminopyrine accumulation stimulated by dibutyryl cAMP in isolated rabbit parietal cells in vitro and histamine-induced gastric acid secretion in pylorus-ligated rats by intraduodenal administration in vivo were evaluated, and the structure-activity relationships were examined. Among the compds. synthesized, 2-[(2,4-dimethoxybenzyl)sulfinyl]-N-(4-pyridyl)nicotinamide (I) showed potent inhibitory activities in vitro and in vivo equivalent to those of omeprazole, a typical H⁺/K⁺-ATPase inhibitor. Moreover, I was much more **stable** at neutral and weakly acidic pH than omeprazole, **lansoprazole**, and pantoprazole. I 8b is considered to be a promising agent for treating acid-related gastrointestinal disorders.

REFERENCE COUNT: 30 THERE ARE 30 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

AB A new series of N-Substituted 2-(benzhydryl- and benzylsulfinyl)nicotinamides were synthesized. Upon acid activation in the acidic environment of the parietal cell, these compds. are converted into their active forms, 2,3-dihydro-3-oxoisothiazolo[5,4-b]pyridines, which inhibit gastric H⁺/K⁺-ATPase. Inhibitory activities against [14C]aminopyrine accumulation stimulated by dibutyryl cAMP in isolated rabbit parietal cells in vitro and histamine-induced gastric acid secretion in pylorus-ligated rats by intraduodenal administration in vivo were evaluated, and the structure-activity relationships were examined. Among the compds. synthesized, 2-[(2,4-dimethoxybenzyl)sulfinyl]-N-(4-pyridyl)nicotinamide (I) showed potent inhibitory activities in vitro and

in vivo equivalent to those of omeprazole, a typical H⁺/K⁺-ATPase inhibitor. Moreover, I was much more **stable** at neutral and weakly acidic pH than omeprazole, **lansoprazole**, and pantoprazole. I 8b is considered to be a promising agent for treating acid-related gastrointestinal disorders.

L2 ANSWER 49 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 1996:720269 CAPLUS

DOCUMENT NUMBER: 126:219

TITLE: Pharmacokinetic optimization in the treatment of gastro-esophageal reflux disease

AUTHOR(S): Hatlebakk, Jan Gunnar; Berstad, Arnold

CORPORATE SOURCE: Haukeland Hospital, University Bergen, Bergen, Norway

SOURCE: Clinical Pharmacokinetics (1996), 31(5), 386-406

CODEN: CPKNDH; ISSN: 0312-5963

PUBLISHER: Adis

DOCUMENT TYPE: Journal; General Review

LANGUAGE: English

AB A review with 131 refs. Gastro-esophageal reflux disease (GORD) is a very common disorder of upper gastro-intestinal motility, differing widely in severity and prognosis. Medical therapy of GORD has involved antacids, alginates, prokinetic agents and antisecretory compds., primarily H₂ receptor antagonists and proton pump inhibitors. Knowledge of the pharmacokinetics of these compds. is important, to optimize the therapeutic benefit in each patient. GORD patients are often elderly and pharmacokinetics are more variable in this group. Furthermore, they often suffer from other diseases needing medical therapy and may need a combination of drugs to heal reflux esophagitis and relieve reflux symptoms. The ideal therapy for GORD will have linear pharmacokinetics, a relatively long plasma half-life (t_{1/2}), a duration of action allowing once daily administration, and a **stable** effect independent of interactions with food, antacids and other drugs. Over-the-counter antacids and alginates are widely used, but may affect absorption of H₂ receptor antagonists like cimetidine and ranitidine. Aluminum-containing antacids may, over time, cause toxicity in patients with renal insufficiency. In the treatment of GORD, cisapride presents important advantages over earlier prokinetic compds., with a longer plasma t_{1/2}, low penetration of the blood-brain barrier and fewer adverse effects. The group of H₂ receptor antagonists is still the most frequently used therapy for GORD. Linear pharmacokinetics make dose adjustments easy and safe. In individual patients, suppression of gastric secretion is related to the area under the plasma concentration-time curve (AUC), but there is wide interindividual variation in the effect of the same oral dose. Only with frequent administration and high doses will acid suppression approx. that of proton pump inhibitors. Tolerance, with loss of effect over time, however, is most pronounced in this situation. H₂ receptor antagonists seem well suited for on-demand treatment of reflux symptoms, due to the rapid onset of effect and a decreased likelihood of the development of tolerance. Effervescent formulations provide more rapid absorption and almost immediate clin. effect. Cimetidine, however, causes interference with the metabolism of several other drugs in common use. In elderly patients elimination is delayed and in patients with renal insufficiency, dose redns. of all H₂ receptor antagonists are recommended. The most effective medical therapy for any severity of GORD, particularly in severe esophagitis, are the proton pump inhibitors. The substituted benzimidazoles (omeprazole, **lansoprazole** and pantoprazole), are prodrugs which once trapped and activated in the acid milieu of the gastric glands potently suppress gastric secretion of acid and pepsin. Their long duration of action, more related to the slow turnover of parietal cell H⁺-K⁺ ATPase mols., allows once daily administration in most patients. Interindividual variation in bioavailability sometimes calls for higher doses or twice daily administration. Acid suppression is

closely related to the AUC. Omeprazole is prone to interaction with the metabolism of other drugs, some of which may be clin. important. Lansoprazole seems to have an earlier onset of action than omeprazole, ascribed to higher bioavailability during the first days of treatment. Proton pump inhibitors have a slow onset of action, which makes them unsuited for on-demand therapy. Clin. practice in GORD calls for the use of not one but several substances, according to the severity and symptom pattern of the patient. Pharmacokinetic optimization in the treatment of GORD is a question of selecting the most suitable substances and administration schemes within each group. Cisapride is superior to other prokinetics in terms of longer plasma $t_{1/2}$ and less toxicity. Amongst H₂ receptor antagonists, the more long-acting compds., ranitidine and famotidine, will improve acidity control throughout 24 h and also cause less metabolic interaction with other drugs than cimetidine. Lansoprazole has a higher bioavailability than omeprazole from the first day of therapy, resulting in the more rapid relief of symptoms. Pantoprazole may cause fewer drug interactions than other proton pump inhibitors.

AB A review with 131 refs. Gastro-esophageal reflux disease (GORD) is a very common disorder of upper gastro-intestinal motility, differing widely in severity and prognosis. Medical therapy of GORD has involved antacids, alginates, prokinetic agents and antisecretory compds., primarily H₂ receptor antagonists and proton pump inhibitors. Knowledge of the pharmacokinetics of these compds. is important, to optimize the therapeutic benefit in each patient. GORD patients are often elderly and pharmacokinetics are more variable in this group. Furthermore, they often suffer from other diseases needing medical therapy and may need a combination of drugs to heal reflux esophagitis and relieve reflux symptoms. The ideal therapy for GORD will have linear pharmacokinetics, a relatively long plasma half-life ($t_{1/2}$), a duration of action allowing once daily administration, and a **stable** effect independent of interactions with food, antacids and other drugs. Over-the-counter antacids and alginates are widely used, but may affect absorption of H₂ receptor antagonists like cimetidine and ranitidine. Aluminum-containing antacids may, over time, cause toxicity in patients with renal insufficiency. In the treatment of GORD, cisapride presents important advantages over earlier prokinetic compds., with a longer plasma $t_{1/2}$, low penetration of the blood-brain barrier and fewer adverse effects. The group of H₂ receptor antagonists is still the most frequently used therapy for GORD. Linear pharmacokinetics make dose adjustments easy and safe. In individual patients, suppression of gastric secretion is related to the area under the plasma concentration-time curve (AUC), but there is wide interindividual variation in the effect of the same oral dose. Only with frequent administration and high doses will acid suppression approx. that of proton pump inhibitors. Tolerance, with loss of effect over time, however, is most pronounced in this situation. H₂ receptor antagonists seem well suited for on-demand treatment of reflux symptoms, due to the rapid onset of effect and a decreased likelihood of the development of tolerance. Effervescent formulations provide more rapid absorption and almost immediate clin. effect. Cimetidine, however, causes interference with the metabolism of several other drugs in common use. In elderly patients elimination is delayed and in patients with renal insufficiency, dose redns. of all H₂ receptor antagonists are recommended. The most effective medical therapy for any severity of GORD, particularly in severe esophagitis, are the proton pump inhibitors. The substituted benzimidazoles (omeprazole, lansoprazole and pantoprazole), are prodrugs which once trapped and activated in the acid milieu of the gastric glands potentially suppress gastric secretion of acid and pepsin. Their long duration of action, more related to the slow turnover of parietal cell H⁺-K⁺ ATPase mols., allows once daily administration in most patients. Interindividual variation in bioavailability sometimes calls for higher doses or twice daily administration. Acid suppression is

closely related to the AUC. Omeprazole is prone to interaction with the metabolism of other drugs, some of which may be clin. important. **Lansoprazole** seems to have an earlier onset of action than omeprazole, ascribed to higher bioavailability during the first days of treatment. Proton pump inhibitors have a slow onset of action, which makes them unsuited for on-demand therapy. Clin. practice in GORD calls for the use of not one but several substances, according to the severity and symptom pattern of the patient. Pharmacokinetic optimization in the treatment of GORD is a question of selecting the most suitable substances and administration schemes within each group. Cisapride is superior to other prokinetics in terms of longer plasma $t_{1/2}$ and less toxicity. Amongst H₂ receptor antagonists, the more long-acting compds., ranitidine and famotidine, will improve acidity control throughout 24 h and also cause less metabolic interaction with other drugs than cimetidine. **Lansoprazole** has a higher bioavailability than omeprazole from the first day of therapy, resulting in the more rapid relief of symptoms. Pantoprazole may cause fewer drug interactions than other proton pump inhibitors.

L2 ANSWER 50 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 1996:605522 CAPLUS

DOCUMENT NUMBER: 125:230845

TITLE: New **stable** galenic formulations containing an acid-labile benzimidazole compound and their production

INVENTOR(S): Ballester Rodes, Montserrat; Van Boven, Marinus

PATENT ASSIGNEE(S): Esteve Quimica, S.A., Spain

SOURCE: PCT Int. Appl., 18 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: Spanish

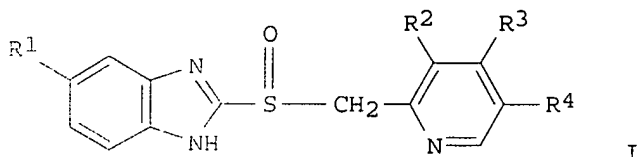
FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
WO 9623500	A1	19960808	WO 1996-ES13	19960126
W: AL, AM, AT, AU, AZ, BB, BG, BR, BY, CA, CH, CN, CZ, DE, DE, DK, EE, FI, GB, GE, HU, IS, JP, KE, KG, KP, KR, KZ, LK, LR, LS, LT, LU, LV, MD, MG, MK, MN, MW, MX, NO, NZ, PL, PT, RO				
RW: KE, LS, MW, SD, SZ, UG, AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE, BF, BJ, CF, CG, CI, CM				
ES 2094694	A1	19970116	ES 1995-181	19950201
ES 2094694	B1	19971216		
US 5626875	A	19970506	US 1995-429689	19950427
IL 116673	A1	20001031	IL 1996-116673	19960104
IN 186596	A	20011006	IN 1996-CA104	19960122
CA 2184842	AA	19960808	CA 1996-2184842	19960126
AU 9645403	A1	19960821	AU 1996-45403	19960126
EP 773025	A1	19970514	EP 1996-901349	19960126
EP 773025	B1	20000607		
R: AT, BE, CH, DE, DK, ES, FR, GB, IE, IT, LI, NL, PT, SE				
JP 09511257	T2	19971111	JP 1996-523278	19960126
EP 993830	A2	20000419	EP 1999-116334	19960126
EP 993830	A3	20011004		
EP 993830	B1	20050413		
R: AT, BE, CH, DE, DK, ES, FR, GB, IT, LI, NL, SE, PT, IE, SI				
AT 193649	E	20000615	AT 1996-901349	19960126
ES 2148725	T3	20001016	ES 1996-901349	19960126
PT 773025	T	20001031	PT 1996-901349	19960126
DE 29623938	U1	20001109	DE 1996-29623938	19960126

10/773,535

TW 503115	B	20020921	TW 1996-85100946	19960126
AT 292967	E	20050415	AT 1999-116334	19960126
ZA 9600683	A	19970730	ZA 1996-683	19960130
FI 9603916	A	19960930	FI 1996-3916	19960930
PRIORITY APPLN. INFO.:			ES 1995-181	A 19950201
			EP 1996-901349	A3 19960126
			WO 1996-ES13	W 19960126
OTHER SOURCE(S):		MARPAT 125:230845		
GI				



- AB The title formulations comprise a neutral core on which is applied a layer containing the active ingredient (I; R1 = H, MeO, F2CHO; R2 = Me, MeO; R3 = MeO, F3CCH2O; R4 = H, Me), a water-soluble polymer, and nonalk. reaction vehicles; on this layer is applied a 2nd isolating layer which comprises a water-soluble polymer, a pigment, and talc, and a last enteric layer which contains a polymer, a plasticizer, and talc. Thus, 3010 g cores composed of sugar and starch were coated in a fluidized bed with a dispersion of omeprazole 436, hydroxypropylmethylcellulose 444, and talc 118 in H2O 3440 g. After drying, the pellets were coated with a dispersion of hydroxypropylmethylcellulose 355, talc 43, and TiO2 43 in H2O 2365 g, dried, given an enteric coating of methacrylic acid copolymer 1950, tri-Et citrate 98, and talc 98 in H2O 1890 g, dried, and stored at 40° and 75% relative humidity. Pellets stored in glass containers showed little discoloration or loss of omeprazole after 3 mo.
- TI New stable galenic formulations containing an acid-labile benzimidazole compound and their production
- IT Ulcer inhibitors
(stable galenic formulations containing acid-labile benzimidazole compds.)
- IT Pharmaceutical dosage forms
(pellets, enteric-coated, stable galenic formulations containing acid-labile benzimidazole compds.)
- IT 73590-58-6, Omeprazole 103577-45-3, **Lansoprazole**
RL: BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(stable galenic formulations containing acid-labile benzimidazole compds.)
- IT 9004-64-2, Hydroxypropylcellulose 9004-65-3, Hydroxypropylmethylcellulose 25086-15-1, Methacrylic acid/methyl methacrylate copolymer
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(stable galenic formulations containing acid-labile benzimidazole compds.)

L2 ANSWER 51 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 1996:532133 CAPLUS

DOCUMENT NUMBER: 125:185465

TITLE: Long-term treatment with **lansoprazole** for patients with Zollinger-Ellison syndrome

AUTHOR(S): Hirschowitz, B. I.; Mohnen, J.; Shaw, S.

CORPORATE SOURCE: Department Medicine, University Alabama, Birmingham,

AL, 35294, USA
 SOURCE: Alimentary Pharmacology and Therapeutics (1996),
 10(4), 507-522
 CODEN: APTHEN; ISSN: 0269-2813
 PUBLISHER: Blackwell
 DOCUMENT TYPE: Journal
 LANGUAGE: English

AB Normalization of gastric secretion and cure of associated upper gastrointestinal lesions by resection of gastrinoma is possible in $\approx 20\%$ of patients with Zollinger-Ellison syndrome, leaving $\approx 80\%$ dependent on medical treatment with proton pump inhibitors for acid suppression. **Lansoprazole** was given for 3-48 mo (median 28 mo) to 26 Zollinger-Ellison syndrome patients with peptic ulcer manifestations in all and esophagitis in 13. Starting with 60 mg/day, the dose was individualized to lower basal acid output to less than 5 mmol/h for those with intact stomachs and less than 1 mmol/h in those who had prior gastrectomy or with esophagitis. The patients were studied every 3 mo for 1 yr and then every 6 mo with gastric anal. (basal and maximal acid and pepsin output) and endoscopy with biopsy for enterochromaffin-like (ECL) cells. **Lansoprazole** inhibited basal acid output by 95%, pepsin output by 65% and remained effective at the initial mean (66 ± 4.3 mg/day) or smaller doses (56 ± 12 mg/day) at 48 mo. Mucosal lesions healed and symptoms (ulcer-type pain, diarrhea, heartburn, weight loss) resolved rapidly, usually within a few weeks. Serum gastrin and ECL cell populations, which were elevated before treatment, remained statistically unchanged but one of the three multiple endocrine neoplasia I (MEN-I) patients developed a small carcinoid. Of the three patients with metastatic gastrinoma at diagnosis one has died and one has progressed, while the third has had **stable** liver metastases for 26 yr. Ulcer-type relapses occurred in three of the five post-gastrectomy patients, one with fatal jejunal ulcer perforation despite adequate acid suppression. No biochem. or clin. adverse events due to **lansoprazole** were encountered. **Lansoprazole** effectively inhibits acid and pepsin secretion in Zollinger-Ellison syndrome patients without any demonstrated side-effects. Despite strict acid control, post-gastrectomy Zollinger-Ellison syndrome patients were more liable to ulcer relapse, while oesophagitis was not a marker for therapeutic difficulty.

TI Long-term treatment with **lansoprazole** for patients with Zollinger-Ellison syndrome

AB Normalization of gastric secretion and cure of associated upper gastrointestinal lesions by resection of gastrinoma is possible in $\approx 20\%$ of patients with Zollinger-Ellison syndrome, leaving $\approx 80\%$ dependent on medical treatment with proton pump inhibitors for acid suppression. **Lansoprazole** was given for 3-48 mo (median 28 mo) to 26 Zollinger-Ellison syndrome patients with peptic ulcer manifestations in all and esophagitis in 13. Starting with 60 mg/day, the dose was individualized to lower basal acid output to less than 5 mmol/h for those with intact stomachs and less than 1 mmol/h in those who had prior gastrectomy or with esophagitis. The patients were studied every 3 mo for 1 yr and then every 6 mo with gastric anal. (basal and maximal acid and pepsin output) and endoscopy with biopsy for enterochromaffin-like (ECL) cells. **Lansoprazole** inhibited basal acid output by 95%, pepsin output by 65% and remained effective at the initial mean (66 ± 4.3 mg/day) or smaller doses (56 ± 12 mg/day) at 48 mo. Mucosal lesions healed and symptoms (ulcer-type pain, diarrhea, heartburn, weight loss) resolved rapidly, usually within a few weeks. Serum gastrin and ECL cell populations, which were elevated before treatment, remained statistically unchanged but one of the three multiple endocrine neoplasia I (MEN-I) patients developed a small carcinoid. Of the three patients with metastatic gastrinoma at diagnosis one has died and one has progressed, while the third has had **stable** liver metastases for 26 yr.

Ulcer-type relapses occurred in three of the five post-gastrectomy patients, one with fatal jejunal ulcer perforation despite adequate acid suppression. No biochem. or clin. adverse events due to **lansoprazole** were encountered. **Lansoprazole** effectively inhibits acid and pepsin secretion in Zollinger-Ellison syndrome patients without any demonstrated side-effects. Despite strict acid control, post-gastrectomy Zollinger-Ellison syndrome patients were more liable to ulcer relapse, while oesophagitis was not a marker for therapeutic difficulty.

ST **lansoprazole** antiulcer Zollinger Ellison syndrome; proton pump inhibitor Zollinger Ellison syndrome
 IT Ulcer inhibitors
 Zollinger-Ellison syndrome
 (long-term treatment with **lansoprazole** for humans with Zollinger-Ellison syndrome)
 IT 103577-45-3, **Lansoprazole**
 RL: ADV (Adverse effect, including toxicity); BAC (Biological activity or effector, except adverse); BSU (Biological study, unclassified); THU (Therapeutic use); BIOL (Biological study); USES (Uses)
 (long-term treatment with **lansoprazole** for humans with Zollinger-Ellison syndrome)

L2 ANSWER 52 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 1995:879530 CAPLUS

DOCUMENT NUMBER: 123:305840

TITLE: Review article: The continuing development of proton-pump inhibitors with particular reference to pantoprazole

AUTHOR(S): Huber, R.; Kohl, B.; Sachs, G.; Senn-Bilfinger, J.; Simon, W. A.; Sturm, E.

CORPORATE SOURCE: Research Laboratories Byk Gulden, Konstanz, D-78467, Germany

SOURCE: Alimentary Pharmacology and Therapeutics (1995), 9(4), 363-78

CODEN: APTHEN; ISSN: 0269-2813

PUBLISHER: Blackwell

DOCUMENT TYPE: Journal; General Review

LANGUAGE: English

AB A review with 59 refs. Inhibition of the gastric proton pump is gaining acceptance as the treatment of choice for severe gastroesophageal reflux disease, and for treatment of duodenal and gastric ulceration. Three of these drugs are now available (omeprazole, **lansoprazole** and pantoprazole) and more are being developed. Proton-pump inhibitors share the same core structure, but differ in terms of substituents on this core. The substitutions are able to modify some important chemical properties of the compds. For example, pantoprazole is significantly more acid-stable than omeprazole or **lansoprazole**. E3810 is significantly less stable than the other compds. We present an explanation for this finding that depends on the relative pK values for the pyridine and benzimidazole nitrogens, especially the former. Pantoprazole formulated in an enteric-coated tablet displays high bioavailability and linear pharmacokinetics whether on single or multiple dose regimens. Although all three proton-pump inhibitors provide a similar chemical conversion to sulphenamides, which are highly reactive cysteine reagents, these reagents derivatize different cysteines in the extracytoplasmic or membrane domain of the pump and inhibit the pump at different rates. Whereas the differences in chemical reactivity can be explained by the solution chemical of the compds., selective derivatization of different cysteines on the protein argues for an involvement of pump structure in response to the presence of the proton-pump inhibitor on its luminal surface. This suggests that the proton-pump inhibitors, which were originally designed to take advantage of only the highly acidic space generated in the

parietal cell by the production of the sulphenamide, are made even more selective by the protein they target. Pantoprazole is metabolized by a combination of phase I and phase II metabolism, and has also been shown to have a very low potential for drug interaction. Studies of acid secretion in man have shown this compound to be an effective and long lasting inhibitor of acid secretion. The pharmacodynamics explain the cumulative effect of repeated doses and maximal acid secretory capacity with a once daily dosage.

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L2 ANSWER 53 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 1995:503243 CAPLUS

DOCUMENT NUMBER: 122:248373

TITLE: Compositions for rectal administration containing benzimidazoles and fatty acid salts

INVENTOR(S): Uda, Yoshiaki

PATENT ASSIGNEE(S): Takeda Chemical Industries, Ltd., Japan

SOURCE: Eur. Pat. Appl., 23 pp.

CODEN: EPXXDW

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
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EP 645140	A1	19950329	EP 1994-306401	19940831
EP 645140	B1	19981202		
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, IT, LI, LU, NL, PT, SE				
CA 2131116	AA	19950301	CA 1994-2131116	19940830
JP 07316052	A2	19951205	JP 1994-205485	19940830

10/773,535

US 5635520	A	19970603	US 1994-298156	19940830
CN 1106662	A	19950816	CN 1994-115636	19940831
CN 1100536	B	20030205		
AT 173924	E	19981215	AT 1994-306401	19940831
ES 2125413	T3	19990301	ES 1994-306401	19940831
PRIORITY APPLN. INFO.:			JP 1993-216685	A 19930831
			JP 1994-60972	A 19940330

OTHER SOURCE(S): MARPAT 122:248373

AB The present invention relates to a composition for rectal administration which comprises a benzimidazole compound having antiulcer activity and a salt of C6-20 fatty acid, both of which are intermingled with each other in a base for rectal administration. The composition is effective for the treatment of gastrointestinal ulcers, is excellent in the stability of the active ingredient therein and the absorption thereof to insure an early attainment of therapeutically effective blood concentration and permits control of the drug absorption rate. Furthermore, the composition swells in the intestinal tract, attaches itself to the mucosa, and releases the active ingredient gradually over a long time to supply the drug at a high concentration

and with high efficiency. Therefore, the expected therapeutic efficacy can be obtained at a low dosage level with a min. side effect. A composition containing **lansoprazole** 20, PEG-4000 960, and Na oleate 20 mg was stable for >1 mo.

AB The present invention relates to a composition for rectal administration which comprises a benzimidazole compound having antiulcer activity and a salt of C6-20 fatty acid, both of which are intermingled with each other in a base for rectal administration. The composition is effective for the treatment of gastrointestinal ulcers, is excellent in the stability of the active ingredient therein and the absorption thereof to insure an early attainment of therapeutically effective blood concentration and permits control of the drug absorption rate. Furthermore, the composition swells in the intestinal tract, attaches itself to the mucosa, and releases the active ingredient gradually over a long time to supply the drug at a high concentration

and with high efficiency. Therefore, the expected therapeutic efficacy can be obtained at a low dosage level with a min. side effect. A composition containing **lansoprazole** 20, PEG-4000 960, and Na oleate 20 mg was stable for >1 mo.

ST antiulcer suppository benzimidazole fatty acid salt; rectal prepn **lansoprazole** sodium oleate stability

IT 143-19-1, Sodium oleate 408-35-5, Sodium palmitate 1002-62-6, Sodium caprate 73590-58-6, Omeprazole 102625-70-7, Pantoprazole 103577-45-3, **Lansoprazole** 103577-82-8 117976-90-6, E-3810

RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(rectal prepn. containing antiulcer benzimidazoles and fatty acid salts)

L2 ANSWER 54 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 1995:294419 CAPLUS

DOCUMENT NUMBER: 122:64400

TITLE: Veterinary composition containing a proton pump inhibitor

INVENTOR(S): Olovson, Stig-Goeran Arthur; Pilbrant, Aake Gunnar

PATENT ASSIGNEE(S): Astra AB, Swed.

SOURCE: PCT Int. Appl., 18 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
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WO 9425070 A1 19941110 WO 1994-SE368 19940426
W: AT, AU, BB, BG, BR, BY, CA, CH, CN, CZ, DE, DK, ES, FI, GB, GE,
HU, JP, KG, KP, KR, KZ, LK, LU, LV, MD, MG, MN, MW, NL, NO, NZ,
PL, PT, RO, RU, SD, SE, SI, SK, TJ, TT, UA, UZ, VN
RW: AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, IT, LU, MC, NL, PT, SE,
BF, BJ, CF, CG, CI, CM, GA, GN, ML, MR, NE, SN, TD, TG
IL 109245 A1 20000716 IL 1994-109245 19940407
IN 182614 A 19990515 IN 1994-DE468 19940421
LT 3263 B 19950525 LT 1994-1920 19940422
CA 2161683 AA 19941110 CA 1994-2161683 19940426
AU 9466938 A1 19941121 AU 1994-66938 19940426
AU 678830 B2 19970612
EP 696921 A1 19960221 EP 1994-914665 19940426
EP 696921 B1 20010207
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IE, IT, LI, LU, MC, NL, PT, SE
BR 9406363 A 19960227 BR 1994-6363 19940426
CN 1122109 A 19960508 CN 1994-191967 19940426
CN 1100570 B 20030205
JP 08509493 T2 19961008 JP 1994-524159 19940426
HU 74868 A2 19970228 HU 1995-3085 19940426
RU 2131267 C1 19990610 RU 1995-122630 19940426
CZ 285191 B6 19990616 CZ 1995-2825 19940426
PL 176755 B1 19990730 PL 1994-311276 19940426
SK 280465 B6 20000214 SK 1995-1354 19940426
AT 199060 E 20010215 AT 1994-914665 19940426
ES 2155473 T3 20010516 ES 1994-914665 19940426
PT 696921 T 20010629 PT 1994-914665 19940426
US 5731002 A 19980324 US 1994-235258 19940429
NO 9504240 A 19951023 NO 1995-4240 19951023
NO 312435 B1 20020513
FI 9505124 A 19951027 FI 1995-5124 19951027
GR 3035831 T3 20010831 GR 2001-400679 20010507
PRIORITY APPLN. INFO.: SE 1993-1489 A 19930430
WO 1994-SE368 W 19940426

AB A **stable**, oral pharmaceutical composition comprising a proton pump inhibitor and a gelling agent designed for the treatment of gastric acid related diseases in animals. E.g., omeprazole enteric-coated pellets were prepared
AB A **stable**, oral pharmaceutical composition comprising a proton pump inhibitor and a gelling agent designed for the treatment of gastric acid related diseases in animals. E.g., omeprazole enteric-coated pellets were prepared
IT 73590-58-6, Omeprazole 102625-70-7, Pantoprazole 103577-45-3, **Lansoprazole** 104340-86-5, Leminoprazole
RL: THU (Therapeutic use); BIOL (Biological study); USES (Uses)
(veterinary composition containing a proton pump inhibitor)

L2 ANSWER 55 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 1994:491832 CAPLUS

DOCUMENT NUMBER: 121:91832

TITLE: Method for preparing a **stable** oral dosage form containing **lansoprazole**

INVENTOR(S): Moreno Rueda, Juan; Bosch Rovira, Anna; Canals Vidal, Ramon; Caldero Ges, Jose Maria

PATENT ASSIGNEE(S): Vita-Invest. S.A., Spain

SOURCE: Span., 5 pp.
CODEN: SPXXAD

DOCUMENT TYPE: Patent
LANGUAGE: Spanish

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
ES 2047451	A1	19940216	ES 1992-1425	19920710
ES 2047451	B1	19941001		
PRIORITY APPLN. INFO.:			ES 1992-1425	19920710

AB A **stable** oral dosage form for treatment of gastrointestinal illnesses [no data] can be prepared by suspending **lansoprazole** in an aqueous solution of disodium phosphate and sodium lauryl sulfate, mixing with other excipients, granulating and spherulating the mixture, and coating with a soluble isolating material and then with a final enteric coating. Filled into gelatin capsules and stored at room temperature in hermetically sealed containers, the **lansoprazole** is **stable** for 2 yr.

TI Method for preparing a **stable** oral dosage form containing **lansoprazole**

AB A **stable** oral dosage form for treatment of gastrointestinal illnesses [no data] can be prepared by suspending **lansoprazole** in an aqueous solution of disodium phosphate and sodium lauryl sulfate, mixing with other excipients, granulating and spherulating the mixture, and coating with a soluble isolating material and then with a final enteric coating. Filled into gelatin capsules and stored at room temperature in hermetically sealed containers, the **lansoprazole** is **stable** for 2 yr.

ST **lansoprazole** oral dosage form formulation

IT Pharmaceutical dosage forms
(capsules, **lansoprazole**-containing, formulation of)

IT Digestive tract
(disease, **lansoprazole** oral dosage forms for treatment of, in humans)

IT 63-42-3, Lactose 69-65-8, D-Mannitol 151-21-3, Sodium lauryl sulfate, biological studies 7558-79-4, Disodium phosphate 9004-65-3, Hydroxypropylmethylcellulose 9050-31-1, Hydroxypropylmethylcellulose phthalate 36653-82-4, 1-Hexadecanol
RL: BIOL (Biological study)
(in **lansoprazole**-containing oral formulation)

IT 9004-34-6, Cellulose, biological studies
RL: BIOL (Biological study)
(microcryst., in **lansoprazole**-containing oral formulation)

IT 103577-45-3, **Lansoprazole**
RL: BIOL (Biological study)
(oral dosage form for human administration of, formulation of)

L2 ANSWER 56 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 1994:307371 CAPLUS

DOCUMENT NUMBER: 120:307371

TITLE: Manufacturing method of **stable** enteric granules of a new antiulcer drug (**lansoprazole**)

AUTHOR(S): Tabata, Tetsuro; Makino, Tadashi; Kikuta, Junichi; Hirai, Shinichiro; Kitamori, Nobuyuki

CORPORATE SOURCE: Prod. Div., Takeda Chem. Ind., Ltd., Osaka, 532, Japan

SOURCE: Drug Development and Industrial Pharmacy (1994), 20(9), 1661-72
CODEN: DDIPD8; ISSN: 0363-9045

DOCUMENT TYPE: Journal

LANGUAGE: English

AB In the authors' previous studies, the authors clarified that enteric granules are an appropriate dosage form for **lansoprazole**, and the authors demonstrated that enteric granules could be produced when magnesium carbonate was added as an alkaline stabilizer. These granules however were found to be some unstable under severe conditions because some of the excipients are incompatible with **lansoprazole**. The

authors therefore attempted granulation not using these incompatible excipients and could obtain more **stable** enteric granules using a centrifugal fluid-bed granulator instead of an extruder-spheronizer. The authors also compared the absorption and dissoln. properties of the enteric granules manufactured by these two methods.

- TI Manufacturing method of **stable** enteric granules of a new antiulcer drug (**lansoprazole**)
- AB In the authors' previous studies, the authors clarified that enteric granules are an appropriate dosage form for **lansoprazole**, and the authors demonstrated that enteric granules could be produced when magnesium carbonate was added as an alkaline stabilizer. These granules however were found to be some unstable under severe conditions because some of the excipients are incompatible with **lansoprazole**. The authors therefore attempted granulation not using these incompatible excipients and could obtain more **stable** enteric granules using a centrifugal fluid-bed granulator instead of an extruder-spheronizer. The authors also compared the absorption and dissoln. properties of the enteric granules manufactured by these two methods.
- ST **lansoprazole** granule enteric
- IT Granulation
(of **lansoprazole**)
- IT Drug bioavailability
Solution rate
(of **lansoprazole**, from enteric granules)
- IT Pharmaceutical dosage forms
(granules, **lansoprazole**, manufacture of **stable** enteric)
- IT 103577-45-3, **Lansoprazole**
RL: BIOL (Biological study)
(granules, manufacture of **stable** enteric)
- IT 9004-64-2, Hydroxypropyl cellulose
RL: BIOL (Biological study)
(**lansoprazole** granules containing, manufacture of **stable** enteric)
- IT 25212-88-8, Eudragit L30D-55
RL: BIOL (Biological study)
(**lansoprazole** granules enteric coated with, manufacture of **stable**)

L2 ANSWER 57 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN

ACCESSION NUMBER: 1992:518333 CAPLUS

DOCUMENT NUMBER: 117:118333

TITLE: Stabilization of a new antiulcer drug (**lansoprazole**) in the solid dosage forms

AUTHOR(S): Tabata, Tetsuro; Makino, Tadashi; Kashiwara, Toshio; Hirai, Shinichiro; Kitamori, Nobuyuki; Toguchi, Hajime

CORPORATE SOURCE: Pharm. Res. Lab., Takeda Chem. Ind., Ltd., Osaka, 532, Japan

SOURCE: Drug Development and Industrial Pharmacy (1992), 18(13), 1437-47

CODEN: DDIPD8; ISSN: 0363-9045

DOCUMENT TYPE: Journal

LANGUAGE: English

AB In a previous study, the authors clarified that enteric granules were appropriate dosage forms of **lansoprazole**. The establishment of these formulations, however, was difficult because some of the excipients needed for these formulations are incompatible with the drug. The effects of adding MgCO₃ as an alkaline stabilizer were examined and **stable** enteric granules were obtained. The mechanism of stabilization is also discussed.

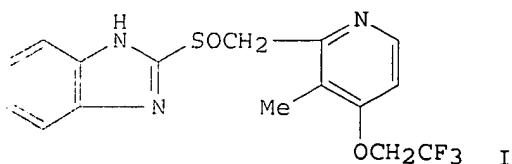
TI Stabilization of a new antiulcer drug (**lansoprazole**) in the solid dosage forms

AB In a previous study, the authors clarified that enteric granules were

appropriate dosage forms of **lansoprazole**. The establishment of these formulations, however, was difficult because some of the excipients needed for these formulations are incompatible with the drug. The effects of adding $MgCO_3$ as an alkaline stabilizer were examined and **stable** enteric granules were obtained. The mechanism of stabilization is also discussed.

- ST **lansoprazole** stabilization solid dosage form; enteric granule stabilization **lansoprazole**
- IT Kinetics of decomposition
(of **lansoprazole**, drug stabilization in dosage forms in relation to)
- IT Pharmaceutical dosage forms
(granules, enteric-coated, **lansoprazole** stabilization in)
- IT Drug interactions
(physicochem., of **lansoprazole**, with excipients)
- IT Pharmaceutical dosage forms
(solids, **lansoprazole** stabilization in)
- IT 57-50-1, Sucrose, biological studies 63-42-3, Lactose 557-04-0, Magnesium stearate 9003-39-8, Poly(vinylpyrrolidone) 9004-34-6, Cellulose, biological studies 9004-64-2, Hydroxypropyl cellulose 9004-65-3, Hydroxypropyl methyl cellulose 9005-25-8, Starch, biological studies 9050-04-8 13463-67-7, Titanium dioxide, biological studies 25322-68-3 106392-12-5
RL: BIOL (Biological study)
(**lansoprazole** compatibility with, in dosage forms)
- IT 103577-45-3, **Lansoprazole**
RL: PROC (Process)
(stabilization of, in solid dosage forms)
- IT 144-55-8, Sodium bicarbonate, biological studies 471-34-1, Calcium carbonate, biological studies 497-19-8, Sodium carbonate, biological studies 546-93-0, Magnesium carbonate 584-08-7, Potassium carbonate 1309-42-8, Magnesium hydroxide 1309-48-4, Magnesium oxide, biological studies 7487-88-9, Magnesium sulfate, biological studies 7786-30-3, Magnesium chloride, biological studies 10043-52-4, Calcium chloride, biological studies
RL: BIOL (Biological study)
(stabilizer, for **lansoprazole** granules)

L2 ANSWER 58 OF 58 CAPLUS COPYRIGHT 2005 ACS on STN
 ACCESSION NUMBER: 1992:181047 CAPLUS
 DOCUMENT NUMBER: 116:181047
 TITLE: Formulation studies of an acid-unstable antiulcer drug, **lansoprazole**
 AUTHOR(S): Hirai, Shinichiro
 CORPORATE SOURCE: Res. Dev. Div., Takeda Chem. Ind., Ltd., Osaka, 532, Japan
 SOURCE: Pharm Tech Japan (1992), 8(2), 213-19
 CODEN: PTJAE9; ISSN: 0910-4739
 DOCUMENT TYPE: Journal
 LANGUAGE: Japanese
 GI



- AB **Lansoprazole** (I), a new substituted benzimidazole, is a highly specific inhibitor of gastric (H⁺ + K⁺)-ATPase. Since this compound is practically insol. in water and unstable in the acidic conditions, it is necessary to design dosage forms for improving bioavailability. From the relationship between the gastric pH and the absorption, development of an enteric dosage form was necessary to protect the degradation in the stomach. Enteric granules had better absorption properties than an enteric tablet. Moreover, by the addition of MgCO₃, as an alkaline stabilizer, and by the manufacturing method using a centrifugal fluid-bed granulator instead of an extruder-spheronizer, very **stable** enteric granules were obtained. Also, I capsule containing enteric granules showed good absorption properties in human.
- TI Formulation studies of an acid-unstable antiulcer drug, **lansoprazole**
- AB **Lansoprazole** (I), a new substituted benzimidazole, is a highly specific inhibitor of gastric (H⁺ + K⁺)-ATPase. Since this compound is practically insol. in water and unstable in the acidic conditions, it is necessary to design dosage forms for improving bioavailability. From the relationship between the gastric pH and the absorption, development of an enteric dosage form was necessary to protect the degradation in the stomach. Enteric granules had better absorption properties than an enteric tablet. Moreover, by the addition of MgCO₃, as an alkaline stabilizer, and by the manufacturing method using a centrifugal fluid-bed granulator instead of an extruder-spheronizer, very **stable** enteric granules were obtained. Also, I capsule containing enteric granules showed good absorption properties in human.
- ST **lansoprazole** enteric granule capsule
- IT Gastric juice
(**lansoprazole** degradation in, enteric granules for protection against)
- IT Drug bioavailability
(of **lansoprazole**, from enteric granules in capsules, in humans)
- IT Pharmaceutical dosage forms
(capsules, containing **lansoprazole** enteric granules, formulation and evaluation of)
- IT Granulation
(fluidized-bed, of **lansoprazole**, for enteric formulation)
- IT Pharmaceutical dosage forms
(granules, enteric, of **lansoprazole**, formulation and evaluation of)
- IT 103577-45-3, **Lansoprazole**
RL: BIOL (Biological study)
(capsules containing enteric granules of, formulation and evaluation of)
- IT 546-93-0, Magnesium carbonate
RL: BIOL (Biological study)
(stabilizer, for **lansoprazole** enteric granules)

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